## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000025401

FILED Apr 12, 2007 Secretary of State

Entity Name: THE TROPICAL APARTMENTS INVESTMENT GROUP, INC. **New Principal Place of Business: Current Principal Place of Business:** 905 WEST PALM DRIVE FLORIDA CITY, FL 33034 **Current Mailing Address: New Mailing Address:** PO BOX 17501 PLANTATION, FL 33318 FEI Number: 65-1055348 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVILLA, MANUEL JR 905 W PÁLM DRIVE FLORIDA CITY, FL 33034 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition DAVILA, MANUEL JR DAVILA, MANUEL JR Name: Name: P.O. BOX 17501 P.O. BOX 17501 Address: Address: City-St-Zip: PLANTATION, FL 33318 City-St-Zip: PLANTATION, FL 33318 Title: () Delete Title: VΡ ( ) Change (X) Addition Name: Name: DAVILA, GLADYS E Address: Address: 905 W PALM DR FLORIDA CITY, FL 33034 City-St-Zip: Citv-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL DAVILA JR PST 04/12/2007