

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000025401

FILED
Apr 23, 2009
Secretary of State

Entity Name: THE TROPICAL APARTMENTS INVESTMENT GROUP, INC.

Current Principal Place of Business:

905 WEST PALM DRIVE
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

PO BOX 17501
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 65-1055348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVILLA, MANUEL JR
905 W PALM DRIVE
FLORIDA CITY, FL 33034 US

Name and Address of New Registered Agent:

DAVILA-ORTIZ, MANUEL
905 W PALM 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: MANUEL DAVILA ORTIZ

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: DAVILA, MANUEL JR
Address: P.O. BOX 17501
City-St-Zip: PLANTATION, FL 33318

Title: P () Delete
Name: DAVILA, GLADYS E
Address: 905 W PALM DR
City-St-Zip: FLORIDA CITY, FL 33034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: DAVILA-ORTIZ, MANUEL
Address: P.O. BOX 17501
City-St-Zip: PLANTATION, FL 33318

Title: VP (X) Change () Addition
Name: DAVILA, GLADYS E
Address: 905 W PALM DR
City-St-Zip: FLORIDA CITY, FL 33034

I hereby certify that the information supplied with this filing does not qualify 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 ORTIZ

PST

04/23/2009

Electronic Signature of Signing Officer or Director

Date