2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2007 8:00 am Secretary of State DOCUMENT # P00000051108 05-01-2007 90007 016 ***150.00 1. Entity Name TROPIC TRADER, INC. Principal Place of Business Mailing Address 3680 ELLIS ROAD 3680 Ellis road FORT MYERS, FL 33905 FORT MYERS, FL 33905 3. Mailing Address 2. Principal Place of Business - No P.O. Box # <u>1525</u>0 Cometer Suite, Apt. #, etc. Suite, Apt. #, etc. 04302007 Cha-P CR2E034 (12/06) Applied For Æity & State 4. FEI Number City & State fort MYRS 65-1010239 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 209 يعو Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MACE, JANICE E Street Address (P.O. Box Number is Not Acceptable) 3680 ELLIS ROAD FORT MYERS, FL 33905 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of re ered agent and title if applicable 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE Change ■ Addition innce, Janice 15250 Cemetery NAME MACE, JANICE NAME STREET ADDRESS 3680 ELLIS ROAD STREET ADDRESS FORT MYERS, FL. 33905 *3396*5 CITY-ST-7IP CITY-ST-7IP fort myous ☐ Delete Change ☐ Addition TITLE TITLE VΡ MACE, KENNETH NAME NAME mace, Kenneth STREET ADDRESS 3680 ELLIS ROAD STREET ADDRESS 1520 Cerestery CITY-ST-7IP FORT MYERS, FL 33905 333905 CITY-ST-7IP Fort Myers ☐ Delete TITLE TITLE ☐ @hange ■ Addition race, Jared MACE, JARED NAME NAME 15g 15250 Cemetery STREET ADDRESS 3680 ELLIS ROAD STREET ADDRESS FORT MYERS, FL 33905 CITY-ST-ZIP CITY-ST-ZIP myors TITLE ☐ Delete TITLE □ enange ☐ Addition mace, Jacob NAME MACE, JACOB NAME 15250 Cerreter STREET ADDRESS 3680 ELLIS ROAD STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33905 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this repert or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or of an attachment with an address, with all other like empowered.

Janke

NING OFFICER OR DIRECTOR

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

mace

President

FILED