

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90025 015 ***150.00

DOCUMENT # P01000063535

1. Entity Name

TROPIC FOOD PRODUCTS, INC.

Principal Place of Business

**5571 NW 112 AVE. APT 202
 MIAMI FL 33178**

Mailing Address

**5571 NW 112 AVE. APT 202
 MIAMI FL 33178**

2. Principal Place of Business

5258 NW 114 AV

Suite, Apt. #, etc.

205

City & State

Miami, FL

Zip

33178

Country

USA

3. Mailing Address

5258 NW 114 AV

Suite, Apt. #, etc.

205

City & State

Miami, FL

Zip

33178

Country

USA

4. FEI Number

52-2346960

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BOTERO, RAUL S

5571 NW 112 AVE, APT 202

MIAMI FL 33178

7. Name and Address of New Registered Agent

Name

Raul Santiago Botero

Street Address (P.O. Box Number is Not Acceptable)

5258 NW 114 AV. #205

City

Miami

FL

Zip Code

33178

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.

SIGNATURE **Raul Santiago Botero**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02-27-2002

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **BOTERO, RAUL S**
 STREET ADDRESS **5571 NW 112 AVE, APT 202**
 CITY-ST-ZIP **MIAMI FL 33178**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **Botero Raul S**
 STREET ADDRESS **5258 NW 114 AV #205**
 CITY-ST-ZIP **Miami FL 33178**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Raul Santiago Botero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-27-2002 (786) 586 5954

Date

Daytime Phone #

CR2E034 (9/01)