

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111549

Entity Name: TROPIC AIR SUPPLY, INC.

FILED
Mar 12, 2004
Secretary of State

Current Principal Place of Business:

4115 BANDY BLVD PMB #12
FORT PIERCE, FL 34981

New Principal Place of Business:

Current Mailing Address:

4115 BANDY BLVD PMB #12
FORT PIERCE, FL 34981

New Mailing Address:

FEI Number: 43-1986264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRELL, RICKEY L ESQ
1595 SE PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: KORBEL, KIMBERLY
Address: 4440 SE 134TH AVENUE
City-St-Zip: OKEECHOBEE, FL 34974

Title: P () Delete
Name: KORBE, KIMBERLY S
Address: 4440 SE 134TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: V () Delete
Name: KORBEL, RONALD G
Address: 4440 SE 134TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: KORBEL, KIMBERLY
Address: 4440 SE 134TH AVENUE
City-St-Zip: OKEECHOBEE, FL 34974

Title: P (X) Change () Addition
Name: KORBEL, KIMBERLY S
Address: 4440 SE 134TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: VP (X) Change () Addition
Name: KORBEL, RONALD G
Address: 4440 SE 134TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: T () Change (X) Addition
Name: KORBEL, RONALD G
Address: 4440 SE 134TH AVE
City-St-Zip: OKEECHOBEE, FL 34981

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KIMBERLY S KORBEL

P/S

03/12/2004

Electronic Signature of Signing Officer or Director

_____ Date