## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P02000130223

Entity Name: TROPICAL DESIGN OF SOUTH FLORIDA, INC.

FILED Nov 08, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2900 W. SAMPLE RD., #180 POMPANO BEACH, FL 33073

Current Mailing Address: New Mailing Address:

2900 W. SAMPLE RD., #180 POMPANO BEACH, FL 33073

FEI Number: 06-1665793 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:

WASHINGTON, AIDA
2900 W SAMPLE RD #120
POMPANO BEACH, FL 33073
US

WATLINGTON, ALDA
2900 W SAMPLE RD
180

POMPANO BEACH, FL 33073 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: ALDA WATLINGTON 11/08/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WATLINGTON, ALDA
 Name:

 Address:
 2900 W. SAMPLE RD., #180
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33073
 City-St-Zip:

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: ALDA WATLINGTON D 11/08/2004