## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000023219

Entity Name: TROPICAL FOODS OF MIAMI CORP.

FILED May 05, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

14501 SW 180 TERR 99 NW 183RD STREET SUITE 205 MIAMI, FL 33177

MIAMI, FL 33169

**Current Mailing Address: New Mailing Address:** 

14501 SW 180 TERR 99 NW 183RD STREET SUITE 205

MIAMI, FL 33177 MIAMI, FL 33169

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAREDO, DAVID J UNIVERSAL PROFESSIONAL BUSINESS CENTER 14501 SW 180 TERR 99 NW 183RD STREET SUITE 205

MIAMI, FL 33177 MIAMI, FL 33169 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: LISA VINCENT 05/05/2005

> 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: () Delete Title: (X) Change ( ) Addition LAREDO, DAVID J VINCENT, YANITHE Name: Name:

14501 SW 180 TERR Address: 99 NW 183RD STREE SUITE 205 Address:

City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33169

( ) Delete Title: ٧S Title: VS (X) Change ( ) Addition

Name: SANTOS, JUAN I Name: MILFORT, ROOSEVELT I 14501 SW 180 TERR Address: 99 NW 183RD STREET SUITE 205 Address:

MIAMI, FL 33177 MIAMI, FL 33169 City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: ( ) Change (X) Addition

Name: CHARLESTON, MARC B Name: Address: 99 NW 183RD STREET SUITE 205 Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33169

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.

Ρ SIGNATURE: YANITHE VINCENT 05/05/2005