

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000118021

FILED
Dec 18, 2009
Secretary of State

Entity Name: TROPICAL TREE SERVICE, INC.

Current Principal Place of Business:

2379 55TH ST SW
NAPLES, FL 34116

New Principal Place of Business:

131 1ST STREET SW
NAPLES, FL 34117

Current Mailing Address:

2379 55TH ST SW
NAPLES, FL 34116

New Mailing Address:

131 1ST STREET SW
NAPLES, FL 34117

FEI Number: 20-0354240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALZAMORA, LEONARDO G
2379 55TH ST SW
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

ALZAMORA, LEONARDO G
131 1ST STREET SW
NAPLES, FL 34117 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: LEONARDO ALZAMORA

12/18/2009

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:

Title: PSTD () Delete
Name: ALZAMORA, BECKY S
Address: 2379 55TH ST SW
City-St-Zip: NAPLES, FL 34116

Title: VD () Delete
Name: ALZAMORA, LEONARDO G
Address: 2379 55TH ST SW
City-St-Zip: NAPLES, FL 34116

Title: VP (X) Delete
Name: ALZAMORA, MELESIO
Address: 2379 55TH ST SW
City-St-Zip: NAPLES, FL 34116

Title: T (X) Delete
Name: HERRERA, EBARARDO
Address: 121 1ST ST SW
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ALZAMORA, BECKY S
Address: 131 1ST STREET SW
City-St-Zip: NAPLES, FL 34117

Title: VD (X) Change () Addition
Name: ALZAMORA, LEONARDO G
Address: 131 1ST STREET SW
City-St-Zip: NAPLES, FL 34117

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LEONARDO ALZAMORA

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12/18/2009

Electronic Signature of Signing Officer or Director

Date