

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144083

FILED
Apr 22, 2004
Secretary of State

Entity Name: TROPICALIA, INC.

Current Principal Place of Business:

201 W MARLIN AVENUE 102
PUNTA GORDA, FL 33950

New Principal Place of Business:

201 W MARION AVENUE
102
PUNTA GORDA, FL 33950

Current Mailing Address:

201 W MARLIN AVENUE 102
PUNTA GORDA, FL 33950

New Mailing Address:

201 W MARION AVENUE
102
PUNTA GORDA, FL 33950

FEI Number: 20-0462643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, J. DAVID
2805 TAMIAMI TRAIL
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

CAMPBELL, J. DAVID
2511 VASCO STREET
STE 115
PUNTA GORDA, FL 33950 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:

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: LAVOIE, VICTORIA
Address: 201 W. MARION AVE. 102
City-St-Zip: PUNTA GORDA, FL 33950

Title: VICE () Change (X) Addition
Name: MCSWEENEY, ITA
Address: 201 W. MARION AVE 102
City-St-Zip: PUNTA GORDA, FL 33950

Title: SEC () Change (X) Addition
Name: MCSWEENEY, OONA
Address: 201 W. MARION AVE 102
City-St-Zip: PUNTA GORDA, FL 33950

Title: TREA () Change (X) Addition
Name: LAVOIE, VICTORIA
Address: 201 W. MARION AVE 102
City-St-Zip: PUNTA GORDA, FL 33950

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: VICTORIA LAVOIE

PRES

04/22/2004

Electronic Signature of Signing Officer or Director

Date