

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073162

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL CUTS IRRIGATION, INC.

**Current Principal Place of Business:**

1311 NW 2ND STREET  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

1311 NW 2ND STREET  
HOMESTEAD, FL 33030

**New Mailing Address:**

**FEI Number:** 20-1088152

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEREZ, ANA L  
ANA L. PEREZ  
18765 S.W. 316 TERR.  
HOMESTEAD, FL 33030 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

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: PEREZ, ANA  
Address: 18765 SW 316 TERRACE  
City-St-Zip: HOMESTEAD, FL 33030

Title: D  
Name: PEREZ, ANA  
Address: 18765 SW 316 TERRACE  
City-St-Zip: HOMESTEAD, FL 33030

I hereby 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 all other like empowered.

SIGNATURE: ANA L. PEREZ

PVST

01/09/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date