

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000098327

FILED  
Jul 07, 2006  
Secretary of State

Entity Name: TROPICAL ISLE TRUCK SERVICE, INC

## Current Principal Place of Business:

1259 W. ATLANTIC BLVD.,  
SUITE 125  
POMPANO BEACH, FL 33069

## New Principal Place of Business:

## Current Mailing Address:

1259 W. ATLANTIC BLVD., SUITE 125  
SUITE 125  
POMPANO BEACH, FL 33069

## New Mailing Address:

FEI Number: 72-1587712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROMM, MICHAEL R ESQ.  
BAMMAN, GIUNTA, HOUSE & ROMM, P.A.  
2189 SOUTHEAST 9TH STREET  
POMPANO BEACH, FL 33062 US

## Name and Address of New Registered Agent:

INVERSO, MICHAEL A  
1259 W ATLANTIC BLVD  
POMPANO BEACH, FL 33069 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: MICHAEL INVERSO

07/07/2006

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: CEO ( ) Delete  
Name: INNOCENZI, KRISTY  
Address: 1259 W. ATLANTIC BLVD., SUITE 125  
City-St-Zip: POMPANO BEACH, FL 33069

Title: PD ( ) Delete  
Name: INVERSO, MICHAEL  
Address: 1259 W. ATLANTIC BLVD., SUITE 125  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP (X) Delete  
Name: INNOCENZI, PAUL  
Address: 1259 W. ATLANTIC BLVD., SUITE 125  
City-St-Zip: POMPANO BEACH, FL 33069

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: INNOCENZI, KRISTY  
Address: 1259 W. ATLANTIC BLVD., SUITE 125  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP (X) Change ( ) Addition  
Name: INVERSO, MICHAEL  
Address: 1259 W. ATLANTIC BLVD., SUITE 125  
City-St-Zip: POMPANO BEACH, FL 33069

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL A INVERSO

VP

07/07/2006

Electronic Signature of Signing Officer or Director

Date