

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000086319

Entity Name: TROPESCAPE INC.

FILED
Oct 05, 2007
Secretary of State

Current Principal Place of Business:

6680 SE. 174TH LANE
SUMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

6680 SE. 174TH LANE
SUMERFIELD, FL 34491

New Mailing Address:

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

Name and Address of Current Registered Agent:

LOWE, RICHARD
748 HOLLY LANE
PLANTATION, FL 33317 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: ROBERT LOWE

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: P/D () Delete
Name: LOWE, ROBERT
Address: 6680 SE 174TH LANE
City-St-Zip: SUMMRFIELD, FL 34491

Title: VP/D () Delete
Name: LOWE, RICHARD
Address: 748 HOLLY LANE
City-St-Zip: PLANTATION, FL 33317

Title: S/T () Delete
Name: LOWE, RICHARD
Address: 748 HOLLY LANE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERT LOWE

Electronic Signature of Signing Officer or Director

P/D

10/05/2007

Date