2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131512

FILED Sep 04, 2007 Secretary of State

Entity Name: TROPICAL ZONE, INC. **Current Principal Place of Business: New Principal Place of Business:** 24125 SW 120TH AVENUE HOMESTEAD, FL 33032 US **Current Mailing Address: New Mailing Address:** 24125 SW 120TH AVENUE HOMESTEAD, FL 33032 US FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VON SCHOLL, PETER 24125 SW 120TH AVENUE HOMESTEAD, FL 33032 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DIRE () Delete () Change () Addition VON SCHOLL, PETER Name: Name: 24125 SW 120TH AVENUE Address: Address: City-St-Zip: HOMESTEAD, FL 33032 US City-St-Zip: () Delete Title: Title: () Change () Addition Name: SCHOLL, MARIA Name: 24125 SW 120TH AVENUE Address: Address: HOMESTEAD, FL 33032 US City-St-Zip: 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: PETER VON SCHOLL DIRE 09/04/2007