2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097693

FILED Mar 11, 2008 Secretary of State

Entity Name: TROPICAL RJ IMPORT & EXPORT, INC.		
Current Principal Place of Business:	New Principal Place of Business:	
4775 BARKLEY CIR APT 10 FORT MYERS, FL 33907	10013 RAVELLO BLVD FORT MYERS, FL 33905	
Current Mailing Address:	New Mailing Address:	
4775 BARKLEY CIR APT 10 FORT MYERS, FL 33907	10013 RAVELLO BLVD FORT MYERS, FL 33905	
FEI Number: 26-0829495 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
METRO BUSINESS SOLUTIONS, INC. 3940 METRO PARKWAY SUITE 105 FORT MYERS, FL 33916 US		
The above named entity submits this statement for the pur in the State of Florida.	rpose of changing its registered office or registered agent, or be	oth,
SIGNATURE:		
Electronic Signature of Registered Agent	t Date	
Election Campaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS:
Title: P () Delete	Title: P (X) Change () Addition	

Title: P () Delete Title: P (X) Change () Addition Name: SILVA, RENATA P Name: SILVA, RENATA P Name: Address: 10013 RAVELLO BLVD City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33905

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 SILVA, JOSE E
 Name:
 SILVA, JOSE E

 Address:
 4775 BARKLEY CIR APT 10
 Address:
 10013 RAVELLO BLVD

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:
 FORT MYERS, FL 33905

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: RENATA P SILVA P 03/11/2008