## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000086072

City-St-Zip:

KISSIMMEE, FL 34743

FILED Jan 19, 2009 Secretary of State

Entity Na	me: TROPIC	AL MARKET, INC.				
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:		
1620 PLEASANT HILL ROAD KISSIMMEE, FL 34746				1622PLEASANT HILL ROAD KISSIMMEE, FL 34746		
Current N	lailing Addre	ss:	New Mailing Address	New Mailing Address:		
1620 PLEASANT HILL ROAD KISSIMMEE, FL 34746				1622 PLEASANT HILL ROAD KISSIMMEE, FL 34746		
FEI Number	: 26-3384953	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and	d Address of	Current Registered Agent:	Name and Address of	New Registered Agent:		
ALMONTE, JUAN 27 BROADWAY KISSIMMEE, FL 34741 US				ABRAHAM, DAYSI 1622 PLEASENT HILL ROAD KISSIMMEE, FL 34746 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,		
SIGNATUI	RE: DAYSLA	BRAHAM		01/19/2009		
	Electro	nic Signature of Registered Age	ent	Date		
Election Ca	mpaign Financir	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ABRAHAM, DA 166 ACAPULO KISSIMMEE, F	O DR	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VP ( ABRAHAM, AN 166 ACAPULC KISSIMMEE, F	O DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name:	SEC ( CASTILLO, HE		Title: ( Name: Address:	()Change ()Addition		

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.

City-St-Zip:

	SIGNATURE: DAY	SI ABRAHAM	Р	01/19/2009
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