

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000087146

**FILED**  
**Sep 15, 2014**  
**Secretary of State**

**Entity Name:** TROPICAL CONCEPTS IRRIGATION CORP

**Current Principal Place of Business:**

2300 N 58 AVENUE  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

2300 N 58 AVENUE  
HOLLYWOOD, FL 33021

**New Mailing Address:**

**FEI Number:** 46-1252209

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HOLTON, JIM  
2300 N 58 AVENUE  
HOLLYWOOD, FL 33021 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:** JIM HOLTON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** MR.  
**Name:** HOLTON, JIM  
**Address:** 2300 N 58 AVENUE  
**City-St-Zip:** HOLLYWOOD, FL 33021

I hereby 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 all other like empowered.

**SIGNATURE:** JIM HOLTON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MR.

09/15/2014

\_\_\_\_\_  
Date