

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 13 AM 11:25

DOCUMENT # P94000029986 (4)

1. Corporation Name

TROPIC SPHEX, INC.

Principal Place of Business

1404 S ATLANTIC AVE
DAYTONA BEACH FL 32118

Mailing Address

1404 S ATLANTIC AVE
DAYTONA BEACH FL 32118

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/18/1994

3a. Date of Last Report

4. FEI Number

59-3235621

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

21 1404 S. ATLANTIC AVE.

Suite, Apt. #, etc.

2a. Mailing Address

26 same

Suite, Apt. #, etc.

City & State

23 Daytona Beach, FLA.

City & State

28

Zip

24 32118

Country

25 U.S.A

Zip

29

Country

30

9. Name and Address of Current Registered Agent

OHNONA, CHARON
624 SEABREEZE AVE
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

81 Name

Georges Kouzoudjian

82 Street Address (P.O. Box Number is Not Acceptable)

436 auburn DRIVE, APT. 50

83

84 City

Daytona Beach

FL

85 Zip Code

32118

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the if applicable.

PRES.

(NOTE: Registered Agent signature required when reappointing)

V-PRESIDENT.

Georges Kouzoudjian

DATE

1/10/95

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
President
Charon Ohnona
2957 oceans trace
Daytona Beach Shores, FL 32118

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V. President
Georges Kouzoudjian
436 Auburn Dr. #50
Daytona Beach, FL 32118

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Georges Kouzoudjian 3/7/95 (904) 258-7200