

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000086005 (3)

1. Corporation Name

TROPIC'S CONSTRUCTION, INC.



Principal Place of Business

Mailing Address

**1145 HIGHLAND ROAD
LANTANA FL 33462**

**1145 HIGHLAND ROAD
LANTANA FL 33462**

2. Principal Place of Business

2a. Mailing Address

21 **6788 Trade Wind Way**

26 **6788 Trade Wind Way**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Lantana Fla**

28 **Lantana Fla**

Zip

Zip

24 **33462**

25 **Palm Beach**

29 **33462**

30 **Palm Beach**

9. Name and Address of Current Registered Agent

**SIEWERT, PATRICIA
1145 HIGHLAND ROAD
LANTANA FL 33462**

10. Name and Address of New Registered Agent

81 Name **Patricia M Siewert**
82 Street Address (P.O. Box Number is Not Acceptable)
6788 Trade Wind Way
83
84 City **Lantana** FL 85 Zip Code **33462**

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

Patricia M Siewert
Signature typed or printed name of registered agent and the filer (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

7-24-96

12. OFFICERS AND DIRECTORS

TITLE **PDT** ☐ DELETE
NAME **SIEWERT, PATRICIA**
STREET ADDRESS **1145 HIGHLAND ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

TITLE **VM** ☐ DELETE
NAME **SIEWERT, RONALD**
STREET ADDRESS **1145 HIGHLAND ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PDT** ☒ Change ☐ Addition
1.2 NAME **Siewert Patricia**
1.3 STREET ADDRESS **6788 Trade Wind Way**
1.4 CITY-ST-ZIP **Lantana Fla 33462**

2.1 TITLE **VM** ☒ Change ☐ Addition
2.2 NAME **Siewert Ronald**
2.3 STREET ADDRESS **6788 Trade Wind Way**
2.4 CITY-ST-ZIP **Lantana Fla 33462**

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

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

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

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

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 119.07(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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Patricia M Siewert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-24-96 561-547-6461
DATE DAYTIME PHONE #

CR2E034 (3/96)