FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000019745 (4)

TROPICAL PROPERTY SERVICES, INC.

Principal Place of Business Mailing Address				a immishin tim seine mist mett mnitt anem iffil	å saini saani biaat äili last		
4450 W SUNRISE BLVD 100 PLANTATION FL \$3313		PO BOX 189013 PLANTATION FL 33318 US		DO NOT WRITE IN THIS	SPACE		
US					3. Date Incorporated or Qualified 03/04/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		65-0658328	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees		
Zip	Country Zip		Country	Country 8. This corporation owes or has paid the current year Intangible		_	
24	25 29 30		30		Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
	UGHAN, CRAIG A		81	Name			
	50 W SUNRISE BLVD	82 Stri		Street Ad	ddress (P.O. Box Number is Not Acceptable)		
100 DI) Antation Fl 33318		83				
'	MINION I E 30310					12.1 % 8	
			84	City	FŁ	85 Zip Code	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 egistered agont, or both, in the Stat m familiar with, and accept the obli	502 and 607.1508, Florida Statut te of Florida Such change was gations of, Section 607.0505, Fl	ies, the abov authorized b orida Statute	e-named c y the corpo s.	orporation subm its this statement for the purpose or oration's board of directors. I hereby accept the app	changing its registered cointment as registered	
SIGNATURE							
12.	Signature typed or preted result of a gistored at	gest and seed applicable (NOI ND DIRECTORS	It : Registered Ag	ent signature re	ADDITIONS/CHANGES TO OFFICERS AND	O DIDECTORS IN 12	
TITLE	Or FIGURA	DELETE	1.1 11TLE		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition	
NAME	DONNELLY, P JAMES		1.2 NAME	1			
STREET ADDRESS	2544 EAGLE RUN			1 ADDRESS			
CITY-ST-ZIP	WESTON FL		1.4 CITY -				
TITLE	VP	☐ DELFTE	2.1 TITLE	31-211		☐ Change ☐ Addition	
NAME	STERNBACH, GIL	<u> </u>	2.2 NAME			_ , _	
STREET ADDRESS	4935 KENSINGTON CR			ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL		2. 4 CITY -				
TITLE	ST	DELETE	3.1 TITLE	V, 211		☐ Change ☐ Addition	
NAME	VAUGHAN, CRAIG A		3.2 NAME		4		
STREET ADDRESS	4440 WESTON DD 444		3.3 STREE	TADDRESS 6	do 44 Co Nest lunción Blut		
CITY-ST-ZIP	FT LAUDERDALE FL		3.4. CITY-		Pleafetin Pl 33313	·	
TITLE		DELETE	4.1 TITLE	<u> </u>		☐ Change ☐ Addition	
NAME			4. 2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-			•	
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME		-	5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY+\$T-ZIP			5.4 CITY-				
TITLE		DELETE	6.1 TITLE	01. TIL		☐ Change ☐ Addition	
NAME			6.2 NAME				
STREET ADORESS				TADDRESS			
SINCE PURCHESS			D.O OTHEL	· HUDITEGO			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual reflect 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 truthee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attach penywor an address. Jean 10/18