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PROFIT **CORPORATION** ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000034634 (1)

FILED May 08 1998 8:00am Secretary of State

Principal Place of Business Nating Address Nating Address Nating Address	TROP	ICAL FINANCIAL SERVICE	S, INC.				1
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Zip Country Zip Country Zip Country 2	23		28				Added to Fees
9. Name and Address of Current Registered Agent TUCCI, GREGORY E ESO 225 ME EIGHTH AVENUE OCALA FL 34470 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 PA City FL 85 Zip Code 86 City FL 86 Size Changing its registered agent, or both, in the Distale of Funca. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Obligations of, Section 607 606, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered agent and provided with a not accept the appointment as registered by the corporation's board of directors. I hereby accept the appointment as registered agent and provided agent and provided agent agent are installed. 12. OFFICERS AND DIRECTORS 13. NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 12. NAME 12. NAME 13. STREET ADDRESS 7575 NW 25A 0CALA FL 34475 14. DIVE-ST-ZIP 15. TITLE 16. Change A CITY-ST-ZIP 17. Change A CITY-ST-ZIP		Country	7 _{IP}	Coun	try	8. This corporation owes or has paid the	
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225 NE EIGHTH AVENUE OCALA FL 34470 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Soctions 607.0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist 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 regists agent and the obligations of, Soction 607.0505, Florida Statutes. SIGNATURE Signature hybed or printed agent and this it appointment as regists agent ag			ent Registered Agent		el Mana	10. Name and Address of New Registers	id Agent
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11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist 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 regists after a personal accept the obligations of, Soction 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name or registered agent agent and like in Applicable (NOTE Registered Agent algorithms required when reinstating) 12.					~		
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 regist 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 register agent, are hardly with, and accept the obligations of, Section 607,0502, Florida Statutes. SIGNATURE Signature, hyped or printed name of registered agent and take if applicable (NOTE Registered Agent algorature required when reinstativg) DATE				[ē	4 City		85 Zip Code
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14. Hereby 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am officer or director of the concentration or the receiver or true the concentration of the concentratio	14. I hereby	certify that the information supplied	with this filing does not au	alify for the exen	ption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

Alvin Huetcher

(904) 754-5241