

4-28-97 B-55111C
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 Apr 28 1997 8:00am
 Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1997



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

DOCUMENT # P96000044921 (0)
 1. Corporation Name:
 TROPICAL PROPERTY HOLDINGS, INC.



Principal Place of Business: 10521 S.W. 184TH TERRACE MIAMI FL 33157
 Mailing Address: 10521 S.W. 184TH TERRACE MIAMI FL 33157-6759

3. Date Incorporated or Qualified: 05/20/1996
 3a. Date of Last Report: NONE
 4. FEI Number: 65-0676066
 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 State Apt. #, etc: 22 City & State: 23 Zip: 24 Country: 25
 2a. Mailing Address: 26 Suite, Apt. #, etc: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
 SCHIFF, JAMES M
 9130 SOUTH DADELAND BOULEVARD
 SUITE 1609
 MIAMI FL 33156

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City: FL 85 Zip Code

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 type: For printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
 TITLE: PD
 NAME: KELLER, LAWRENCE
 STREET ADDRESS: 10521 S.W. 184TH TERRACE
 CITY-ST-ZIP: MIAMI FL 33157
 TITLE: STD
 NAME: KELLER, KATHY
 STREET ADDRESS: 10521 S.W. 184TH TERRACE
 CITY-ST-ZIP: MIAMI FL 33157
 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: Change Addition
 1.2 NAME:
 1.3 STREET ADDRESS:
 1.4 CITY-ST-ZIP:
 2.1 TITLE: STD Change Addition
 2.2 NAME: KELLER, CATHERINE M.
 2.3 STREET ADDRESS: 10521 S.W. 184TH TERRACE
 2.4 CITY-ST-ZIP: MIAMI, FL. 33157
 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 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 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: Lawrence Keller LAWRENCE KELLER 1/6/97 753-3984
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)