2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 20, 2005 8:00 am Secretary of State DOCUMENT # P96000050925 04-20-2005 90312 008 ***150.00 1 Entity Name HEINKE TROPICALS, INC. Mailing Address Principal Place of Business POST OFFICE BOX 272 10611 STANFORD RD WIMAUMA, FL- 33568 RIVERVIEW, FL 33568 CR2E034 (10/03) No Chg-P 04082005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3385771 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required منافي مانداد 6. Name and Address of Current Registered Agent HEINKE, FREDERICK J DO NOT WRITE **US HIGHWAY 301** RIVERVIEW, FL 33569 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS VΡ TITLE HEINKE, TERRONYA F NAME STREET ADDRESS **US HWY 301** RIVERVIEW, FL CITY-ST-ZIP TITLE HEINKE, FREDERICK J NAME **US HWY 301** STREET ADDRESS RIVERVIEW, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

12. I 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 report or supplemental 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 10 or Block 11 if

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS C/IY-ST-7/P

FILED