## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000066380

Entity Name: TROPICAL EXPRESS OF AVENTURA, INC.

FILED Aug 10, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
19575 BISCAYNE BLVD. SPACE NO. 1393 AVENTURA MALL AVENTURA, FL 33180				19575 BISCAYNE BLVD. SPACE NO. 1471 AVENTURA MALL AVENTURA, FL 33180		
Current Mailing Address:				New Mailing Address:		
19575 BISCAYNE BLVD. SPACE NO. 1393 AVENTURA MALL AVENTURA, FL 33180				19575 BISCAYNE BLVD. SPACE NO. 1417 AVENTURA MALL AVENTURA, FL 33180		
FEI Number:	65-0699130	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address of	New Registered Agent:		
SINGLETARY, JIM 13920 SW 104 AVE MIAMI, FL 33176 US  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.						
SIGNATURE:						
Electronic Signature of Registered Agent					Date	
		(2)(b), F.S., the corporation did not r	eceive t	he prior notice.		
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PST () SINGLETARY, J 13920 SW 104 A MIAMI, FL 3317	AVE		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () GARCIA, LAZAR 12049 SW 75 S MIAMI, FL			Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () HOI, SANG YEU 13380 BISCAYN NO MIAMI, FL 3	E BAY DR		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () YING, HO 650 SOUTHSHO MIAMI BEACH, F			Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () GARCIA, JOSE 12425 SW 94 LI MIAMI, FL 3318	N .		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM SINGLETARY PRES 08/10/2007