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Mailing Address P O BOX 1554

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90159 015 \*\*\*150.00

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **P96000082435**

1. Corporation Name

Principal Place of Business

84001 OVEASEAS HWY

SIGNATURE:

TROPICAL SPLASH ENTERPRISES, INC.

	•	ISLAMORADA FL 33030			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporate 10/07/1996	d or Qualifed		<del></del>	
2. Principal Pla	ce of Business	2a. Mailing Address			24. FEI Number	£ .		<u> </u>	pplied For
1		26			67-0702335				lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Stat	tus Desired			Additional Required	
City & State		City & State	_		6. Election Campai	gn Financing		\$5.00	May Be
3		28			Trust Fund Cont	ribution		Added	to Fees
Zip	Country	Zip	Count	try	8. This corporation	owes the curre	nt year Inta	angible .	
4	25	29	30		Personal Propert	ty Tax.		☐ Yes	□No
·1	9. Name and Address of Current	Registered Agent			10. Name and Addr	ress of New R	egistered A	Agent	
				Name					
BANKS, CRAWFORD W			۱,	22 Stroot A	ddress (P.O. Box Number	is Not Accenta	hlel		<del></del>
130 C	ORAL AVE		82 Street Addre		duless (F.O. Dox Number	is Not Accepta	ole)		
TAVEF	RNIER FL 33070		1	33	······································		<u>-</u>		
								11	<del></del>
			1	B4 City			FL	85 Zir	Code
	the provisions of Sections 607.0502	1007 4500 El-24- Statut	- 411-		arnaration aubmits this stat	tomont for the		changing i	ts registered
SIGNATURE 5	Ilgnature, typed or printed name of registered agent			gent signature req	uired when reinstating)  ADDITIONS/CHA	WOED TO 055	DATE	ם חופים	
									ORS IN 12
		DIRECTORS	13.		ADDITIONS/CHA	NGES TO OFT	ICERS AN		
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