FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretar of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

P97000074721 (6)

TROPIC TRANSPORT, INC.

Principal Place of Business Mailing Address

FILED May 27 1998 8:00am Secretary of State



6310 NW 113TH TERR. HIALEAH FL 33012		6310 NW 113TH TERR. HIALEAH FL 33012			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
					08/27/1997
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.		,	5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	2 _(p)	Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY			81		JOSE L. LOPEZ
1201 HAYS STREET TALLAHASSEE FL 32301-2525					at Address (P.O. Box Number is Not Acceptable)
			83	3	HiAleah, FL
			84	City	FL 85 Zp Code 330 ()-
11. Pursuant t	o the provisions of Sections 607.050)2 and 607 1508, Florida Statute	s, the above	T /d-namei	
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 1022 To Product Institute of a good and the diagraphs and (NOII Registered Age				Lopy	ez President 4-27-98 President DATE
12.		D DIRECTORS	13.	jeni signatu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	/b	☐ DELETE	1.1 Title		Change Addition
NAME U	LOPEZ, JOSE L		1.2 NAME		
STREET ADDRESS	6310 NW 113TH TERR.		1.3 STREE	T ADDRESS	;
CITY-ST-ZIP	HIALEAH FL 33012		1.4 CITY-	ST-ZIP	
TITLE	PVST	☐ DELETE	2 1 TITLE		Change Addition C
NAME	LOPEZ, JOSE L		2 2 NAME		
STREET ADDRESS	6310 NW 113TH TERR.			T ADDRESS	5
CITY-ST-ZIP TITLE	HIALEAH FL 33012	DELETE	2 4 CITY- 3 1 TITLE	ST - ZIP	Change Addition
NAME			32 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			3.4. CITY-	S1 - ZIP	
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NAME			4 2 NAME		
STREET ADDRESS			4 3 STREE	t address	
CITY-ST-ZIP		Driere	4 4 CiTY-	ST-ZIP	
TITLE		∐ DELETE	51 TITLE		Change Addition
NAME CAREET ARROSECC			5.2 NAME	1 1000000	
STREET ADDRESS				1 ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE	51 - ZIP	Change Addition
NAME			6.2 NAME		Change Change
STREET ADDRESS				1 ADDRESS	
CITY-SI-ZIP			6.4 CITY -		
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I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther certify that the informatic 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 receivor 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.