

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.**  
**AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

00 JAN -4 PM 2:16

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



**REINSTATEMENT**

DO NOT WRITE IN THIS SPACE

99-00

**DOCUMENT # P97000089381**

Corporation Name

**TROPICAL REPUBLIC, INC.**

Principal Place of Business

3313 NE 33RD ST  
 FT. LAUDERDALE FL 33308  
 US

Mailing Address

3313 NE 33RD ST  
 FT. LAUDERDALE FL 33308  
 US

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

25

29

30

9. Name and Address of Current Registered Agent

**AMERICAN CORPORATIONS UNLIMITED, INC.**  
 3270 N.E. 33RD STREET  
 FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified

10/10/1997

4. FEI Number

65-0790396

Applied For

Not Applicable

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 owes the current year  
 Intangible Personal Property.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

**Joiner, James D**

82 Street Address (P.O. Box Number is Not Acceptable)

**3313 NE 33RD ST**

83

84 City

**FT. Lauderdale FL**

85 Zip Code

**33308**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Joiner, James D**

**1/3/00**

12. OFFICERS AND DIRECTORS

1. TITLE **D** ☐ DELETE  
 2. NAME **JOINER, CONSUELO**  
 3. STREET ADDRESS **3270 N.E. 33RD STREET**  
 4. CITY-ST-ZIP **FT. LAUDERDALE FL 33308**

1. TITLE ☐ DELETE  
 2. NAME  
 3. STREET ADDRESS  
 4. CITY-ST-ZIP

1. TITLE ☐ DELETE  
 2. NAME  
 3. STREET ADDRESS  
 4. CITY-ST-ZIP

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 4. CITY-ST-ZIP

1. TITLE ☐ DELETE  
 2. NAME  
 3. STREET ADDRESS  
 4. 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 ☐ Change ☐ Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

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 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, 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:

**Joiner, James D.**

**1/3/00 954-565-0000**

CR2E034 (5/99)