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FILED

May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000107416 (4)**

1. Corporation Name
TROPICAL GREEN INC.

Principal Place of Business

**358 EAST 44TH STREET
HIALEAH FL**

Mailing Address

**358 EAST 44TH STREET
HIALEAH FL**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/22/1997

2. Principal Place of Business

21 7963 NW. 33 St.

Suite, Apt. #, etc.

22

City & State

23 Miami, FL

Zip

24 33122

Country

25 U.S.A.

2a. Mailing Address

26 7963 NW. 33 St.

Suite, Apt. #, etc.

27

City & State

28 Miami, FL

Zip

29 33122

Country

30 U.S.A.

4. FEI Number

65-0803160

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**ESPINOZA, ROSS
1160 S.W. 139TH AVENUE
MIAMI FL 33184**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**P
ALE, CESAR H
358 EAST 44TH STREET
HIALEAH FL**

TITLE ☐ DELETE

**VP
REQUENA, ALAIN ALI
367 BRASSIE DRIVE
LONGWOOD FL 32750**

TITLE ☐ DELETE

**S
ESPINOZA, ADA
1160 S.W. 139TH AVENUE
MIAMI FL 33184**

TITLE ☐ DELETE

**T
ESPINOZA, ROSS
1160 S.W. 139TH AVENUE
MIAMI FL 33184**

TITLE ☐ DELETE

**D
ALE, URSULA H
358 EAST 44TH STREET
HIALEAH FL**

TITLE ☐ DELETE

**S
REQUENS, CORALYS NIURKA
367 BRASSIE DRIVE
LONGWOOD FL 32750**

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 or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/98 591-5100

Date Daytime Phone # 00000004

CR2E034 (10/97)