2002 UNIFORM BUSINESS REPORT (UBR)

Sep 12, 2002 8:00 am Secretary of State P98000010953 DOCUMENT # 1. Entity Name 09-12-2002 90001 034 ***150.00 TROPIC CONSULTING ENTERPRISES, INC. Principal Place of Business Mailing Address 4611 SOUTH UNIVERSITY DRIVE #145 4611 SOUTH UNIVERSITY DRIVE #145 DAVIE FL 33328 DAVIE FL 33328 2. Principal Place of Business 3. Mailing Address 583 Pondella rondella DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0810068 Myers Not Applicable \$8.75 Additional .5. Certificate of Status Desired -Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RAFFAELE, MARTHA Street Address (P.O. Box Number is Not Acceptable) 4611 SOUTH UNIVERSITY DRIVE #145 DAVIE FL 33328 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. TITLE Delete TIT! F ☐ Change ☐ Addition RAFFAELE, MARTHA NAME 4611 SOUTH UNIVERSITY DRIVE #145 STREET ADDRESS STREET ADDRESS DAVIE FL 33328 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

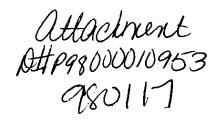
NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

(4/02)



Tropic Consulting Enterprises

DATE: 9/10/02

RE waiving of late fee

Dear State of Florida

We did not receive the first notice of the uniform business report and request a waiver of the late fee. We were in the process of moving our operations from the Davie address to the new North Fort Myers address and the report must have not been forwarded. Enclosed you will find our check for \$150.00, the completed report with the new address and this letter. If there is any questions or if the late fee cannot be waived please call us at 941 656 6070 before cashing this check.

Thank you

Marty Raffaele

'President

Tropic Consulting Enterprises Inc.