

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90071 013 ***150.00

DOCUMENT # P98000037337

i. Entity Name

TROPIC COACHWAYS, INC.

Principal Place of Business

Mailing Address

B STRATFORD WEST
 BEACH FL 33436

32B STRATFORD WEST
 BOYNTON BEACH FL 33436-6333
 US

2. Principal Place of Business

5551 Bermuda Dunes Circle
 Suite, Apt. #, etc.

3. Mailing Address

5551 Bermuda Dunes Circle
 Suite, Apt. #, etc.

City & State

Lake Worth, FL

City & State

Lake Worth, FL

4. FEI Number

65-0840266

Applied For

Not Applicable

Zip

33463

Country

USA

Zip

33463

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BERNSTEIN, MORTON
 32B STRATFORD WEST
 BOYNTON BEACH FL 33436

7. Name and Address of New Registered Agent

Name

Morton Bernstein

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

5551 Bermuda Dunes Circle

City

Lake Worth

FL

Zip Code

33463

8. 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.

SIGNATURE

Morton Bernstein

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

(NOTE: Registered Agent signature required when reinstating)

1/11/2000

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	BERNSTEIN, MORTON	
STREET ADDRESS	32 B STRATFORD WEST	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	AA	<input checked="" type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT	<input checked="" type="checkbox"/> Delete
NAME	Morton Bernstein	
STREET ADDRESS	5551 Bermuda Dunes Circle	
CITY-ST-ZIP	Lake Worth, FL 33463	
TITLE	PRES.	<input checked="" type="checkbox"/> Delete
NAME	Morton Bernstein	
STREET ADDRESS	5551 Bernstein	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Morton Bernstein	
STREET ADDRESS	5551 Bermuda Dunes Circle	
CITY-ST-ZIP	Lake Worth, FL 33463	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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

SIGNATURE:

Morton Bernstein
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/2000

Date

561-968-4992

Daytime Phone #

CR2E034 (9/99)