**PROFIT** CORPORATION ANNUAL REPORT 1000



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Feb 26, 1999 8:00 am Secretary of State

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TROPIC AUTO TINTING CORP.

1. Corporation Name

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Principal Place of Business Mailing Address 17706 S. DIXIE HIGHWAY 17706 S. DIXIE HIGHWAY MIAM) FL 33157 MIAMI FL 33157 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/17/1998 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 \$5:00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 23 28 Zip Country B. This corporation owes the current year Intangible Zip Country Personal Property Tax. Yes 29 30 25 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HERRERA, ANTHONY 82 Street Address (P.O. Box Number is Not Acceptable) 17706 S. DIXIE HIGHWAY **MIAMI FL 33157** 83 85 Zip Code 84 City 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—regent-1 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 applicat (11/98)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13, 12. Change ☐ Additio DIDELETE TITLE 1 S TITLE CR2E034 HERRERA, ANTHONY 12 NAME NAME 13925 S.W. 157TH STREET 13 STREET ADDRESS STREET ADDRESS **MIAMI FL 33177** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Chance DELETE 2.1 TILE TITLE SUMMERS, STEVE 22 NAME NAME 10560 S.W. 156TH PLACE #208 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33196** 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE FREEMAN, MICHELLE S NAME 13925 S.W. 157TH STREET 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33177** 3.4. CITY-ST-ZP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-51-23P

CITY-ST-ZIP 14. I hereby certify that the information supplied with this fitting 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 ceth; 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 attactor and that my name appears in the empowered.

61 TITLE

RO NAME

8.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF BRIMING OFFICER OR DIRECTOR

DELETE

Change

Addition