2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000063566 1. Entity Name TROPIC JUICES INC. Principal Place of Business Mailing Address 13540 SW 128 ST 13540 SW 128 ST #206 #206 MIAMI, FL 33186 MIAMI, FL 33186 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent

FILED
May 02, 2007 08:00 A
Secretary of State

13540 SW 128 ST #206 #206 MIAMI, FL 33186 DO NOT WRITE IN THIS SPACE			04032007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 65-0934006 Not Applicable					
					of Status Desired		75 Additional Required	
6. Name and Address of Current Registered Agent LINTON, IVAN 13540 SW 128 ST #206 MIAMI, FL 33186				DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the ions of registered agent. Signature, typed or printed name of registered agent and to			ulred when reinstating)	h, in the State of Flo	orida. I am famil	iar with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				55.00 May Be Added to Fees	٠			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIR. PD LINTON, IVAN 13540 SW 128 ST #206 MIAMI, FL 33186	•			,			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	<u></u>			DO	NOT W	DITE		
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 taustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS

OF SIGNING OFFICER OR DIRECTOR