

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000063566

Entity Name: TROPIC JUICES INC.

FILED
Sep 22, 2007
Secretary of State

Current Principal Place of Business:

13540 SW 128 ST
#206
MIAMI, FL 33186

New Principal Place of Business:

1374 NW 88 AVE
DORAL, FL 33172

Current Mailing Address:

13540 SW 128 ST
#206
MIAMI, FL 33186

New Mailing Address:

1374 NW 88 AVE
DORAL, FL 33172

FEI Number: 65-0934006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LINTON, IVAN
13540 SW 128 ST
#206
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

LINTON, IVAN
1374 NW 88 AVE
DORAL, FL 33172 US

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: IVAN LINTON

09/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LINTON, IVAN
Address: 13540 SW 128 ST #206
City-St-Zip: MIAMI, FL 33186

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LINTON, IVAN
Address: 1374 NW 88 AVE
City-St-Zip: DORAL, FL 33172

Title: VPD () Change (X) Addition
Name: BENNETT, MARLENE
Address: 1374 NW 88 AVE
City-St-Zip: DORAL, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IVAN LINTON

P

09/22/2007

Electronic Signature of Signing Officer or Director

Date