

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000063566

Entity Name: TROPIC JUICES INC.

FILED
Aug 20, 2008
Secretary of State

Current Principal Place of Business:

1347 NW 88 AVE
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

1347 NW 88 AVE
DORAL, FL 33172

New Mailing Address:

FEI Number: 65-0934006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINTON, IVAN
1347 NW 88 AVE
DORAL, FL 33172 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BENNETT, MARLENE
Address: 1347 NW 88 AVE
City-St-Zip: DORAL, FL 33172

Title: VPD (X) Delete
Name: LINTON, IVAN
Address: 1347 NW 88 AVE
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPD (X) Change () Addition
Name: LINTON, IVAN
Address: 1347 NW 88 AVE
City-St-Zip: DORAL, FL 33172

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

08/20/2008

Electronic Signature of Signing Officer or Director

Date