FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000090821



FILED 04 JAN 16 AH 10: 46

TROPICAL JUGOS & FRUTAS, INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
DO NOT WRITE	IN THIS SI	PAC	E .			
2. Principal Place of Business SOI Brickell Que.				eren er		•
Suite, Apt. #, etc. 9 FL # 920	Suite, Apt. #, etc.				1142 bad refineers	= 03-04
City & State Milomi, FL	City & State			4. FE	El Number 65-1040723	Applied For Not Applicable
Zin 33131 Country	Zip	Country		5. Ce	i. Certificate of Status Desired \$8.75 Additional Fee Required	
	l.	Nama		7. Name and Address of Current Registered Agent		
DO NOT WRITE Street Address IN THIS SPACE City Min			JUSE GR		REGORIO PEREZ	
			Street Address (P.O. Box Number is Not Acceptable)			
			801 Brickell ave a FL#920			# 920
				omi FL 多智的		
8. The above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent ar	of the deposition of the	F. Danietora	ed Agent signature require		stating) DATE	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00	(40)	c. negistere	a Agait Sgrature (Equie	Na wheat lean	9. Election Campaign Financing	\$5.00 ·
Amended UBR is \$61.25 Make Check Payable to Florida Department of State					Trust Fund Contribution.	\$5.00 May Be Added to Fees
10. OFFICERS AND D		8				
NAME (P/D) JOSE GREGORIO PI		TITL NAM				€10
STREET ADDRESS 801 Brickell Ave -		2	eet address		0000282803 02/05/04-01031012	6Q 🖫
CITY-SI-ZIP LIAM, FL 33131	***************************************		+ST-ZIP	*******	02/05/0401031012	**300.00 %
NAME		S TITL	curee concenera jugarangs			2
STREET ADDRESS CITY-ST-ZIP		8	EET ADORESS			
TITLE		CITY TITL	-ST-ZIP			
NAME		8 NAV	(5:55:55:55:56:00 10:40:40 10:40			
STREET ADDRESS CITY-ST-ZIP		8	EET ADDRESS - ST-ZIP		DO NOT WRITE	
TITLE		S TITL				A
NAME		S NAV	96 (10 (10 (0 c (0 c (10 c (0 c) (0 c (0		IN THIS SPACE	
STREET ADDRESS CITY-ST-ZIP		6	eet address -st-219			
TITLE	***************************************	8 TITL				
NAME		NAW	16	101010		
STREET ADDRESS CITY-SI-ZIP		8	EFF ADDRESS			
TITLE		B TITL	-SI-ZIP			
NAME		S NAV				
STREET ADDRESS		80.000	EET ADDRESS			
CITY-ST-ZIP		800000	-\$1-2P			
12. 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 10 or on an attachment with an address, with all other like empowered.						

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

DUE TO CHANGE OF ADDRESS I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2003 UNIFORM BUSINESS REPORT.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY

DOSE G. PEH