

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 15, 2001 08:00 AM**
Secretary of State**DOCUMENT # P99000100374**1. Entity Name
TROPICS SOFTWARE TECHNOLOGIES, INC.Principal Place of Business
330 S PINEAPPLE AVE
STE 205
SARASOTA FL 34236
USMailing Address
PO BOX 2740
SARASOTA FL 34230

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0961319

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentMOBAREKEH MASSOUD M
330 S PINEAPPLE
STE 205
SARASOTA FL 34236
US**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 _____ **02/15/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	FL 34236	<input type="checkbox"/> Delete
V	MASSINGALE STEPHEN B	1819 MAIN STREET SUITE 600	SARASOTA	FL 34236	<input type="checkbox"/> Delete
V	SEIBERT DONNA J	1819 MAIN STREET SUITE 600	SARASOTA	FL 34236	<input type="checkbox"/> Delete
T	WEST ROB	5071 BAY SHORE RD	SARASOTA	FL 34234	<input type="checkbox"/> Delete
PD	MOBAREKEH MASSOUD M	4687 SAN SIRO DRIVE	SARASOTA	FL 34235	<input type="checkbox"/> Delete
STD	MILLER KURT J	1707 TOWNHOUSE DRIVE	CORAM	NY 11727	<input type="checkbox"/> Delete
CD	MILLER H. LINCOLN JR	773 SAINT JUDES DRIVE NORTH	LONGBOAT KEY	FL 34228	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	FL 34209	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VD	MASSINGALE STEPHEN B	6708 22ND AVE WEST	BRADENTON	FL 34209	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
V	SEIBERT DONNA J	2614 WEBBER PL	SARASOTA	FL 34232	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
					<input type="checkbox"/> Change <input type="checkbox"/> Addition
					<input type="checkbox"/> Change <input type="checkbox"/> Addition
SD	MILLER KURT J	15 MAPLE GROVE ST	GREAT NECK	NY 11023	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
CD	MILLER H. LINCOLN JR	4424 CALLE SERNA	SARASOTA	FL 34238	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rob West

T

02/15/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)