

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 423027

Entity Name: TROPIC SUPPLY, INC.**Current Principal Place of Business:**1001 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323**Current Mailing Address:**1001 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323 US**FEI Number:** 59-1452203**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEL VECCHIO (CHARLES F.)
1001 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CD
Name	DEL VECCHIO, CHARLES F
Address	1001 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

Title	SD
Name	DEL VECCHIO, MARY GAIL
Address	1001 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

Title	PD
Name	DEL VECCHIO, CHARLES FJR
Address	1001 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

I hereby 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 all other like empowered.

SIGNATURE: CHARLES DEL VECCHIO

PRESIDENT

02/08/2023

Electronic Signature of Signing Officer/Director Detail

Date