

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000114083

Entity Name: TROPICAL SUPERMARKET NO. 3, INC.**Current Principal Place of Business:**28945 S DIXIE HWY
HOMESTEAD, FL 33033**Current Mailing Address:**28945 S DIXIE HWY
HOMESTEAD, FL 33033 US**FEI Number:** 65-1061343**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASTRO, RAFAEL B
17711 SW 59 CT
SOUTHWEST RANCHES, FL 33331 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 | PD | Title | SD |
| Name | CASTRO, RAFAEL B | Name | RODRIGUEZ, EMMANUEL |
| Address | 17711 SW 59 CT | Address | 2614 NW 69TH AVE |
| City-State-Zip: | SOUTHWEST RANCHES FL 33331 | City-State-Zip: | MARGATE FL 33063 |
| | | | |
| Title | VPD | | |
| Name | PEREZ, RAMONA | | |
| Address | 14955 SW 159TH COURT | | |
| City-State-Zip: | MIAMI FL 33196 | | |

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: RAFAEL CASTRO**PRESIDENT****04/13/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date