

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000077781

**Entity Name:** TROPICAL INVESTORS INC.

**Current Principal Place of Business:**

7738 NW 44TH STREET  
A  
SUNRISE, FL 33351

**Current Mailing Address:**

7738 NW 44TH STREET  
A  
SUNRISE, FL 33351

**FEI Number:** 80-0478910

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SOLES, CURTIS N  
7738 NW 44TH STREET  
A  
SUNRISE, FL 33351 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 P  
Name SOLES, CURTIS N  
Address 7738 NW 44TH STREET  
City-State-Zip: SUNRISE FL 33351

*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:** CURTIS SOLES

**PRESIDENT**

**02/04/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date