

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000066422

**Entity Name:** TROPICAL OUTDOORS AND ACCESSORIES INC

**Current Principal Place of Business:**

5050 DAVIE ROAD  
DAVIE, FL 33314

**Current Mailing Address:**

5050 DAVIE ROAD  
DAVIE, FL 33314

**FEI Number:** 46-3426320

**Certificate of Status Desired:** No

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

RIVERA, REINALDO  
5050 DAVIE ROAD  
DAVIE, FL 33314 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 PDT  
Name RIVERA, REINALDO  
Address 5050 DAVIE ROAD  
City-State-Zip: DAVIE FL 33314

*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:** REINALDO RIVERA

**PRESIDENT**

**04/03/2019**

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

\_\_\_\_\_  
Date