## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000004046

Entity Name: TROPICAL DELIVERY SERVICES INC

**Current Principal Place of Business:** 

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702

## **Current Mailing Address:**

121 S NAPLES ROAD 639

NAPLES, NC 28760 US

FEI Number: 46-4512837 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702 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: BILL HAVRE 04/30/2025

Electronic Signature of Registered Agent Date

639

Officer/Director Detail:

Title P Title VI

NameAXELROD, BRIANNameAXELROD, IVANAAddress121 S NAPLES ROADAddress121 S NAPLES ROAD

City-State-Zip: NAPLES NC 28760 City-State-Zip: NAPLES NC 28760

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.

Electronic Signature of Signing Officer/Director Detail

FILED Apr 30, 2025

**Secretary of State** 

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