2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016278

Entity Name: TROPICAL MOULDINGS, LLC.

Current Principal Place of Business:

6911 NW 87TH AVE
MIAMI, FL 33178

Current Mailing Address:

6911 NW 87TH AVE
MIAMI, FL 33178 US

FEI Number: 20-4313850

FILED
Apr 06, 2016
Secretary of State
CC0221209861

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VARGAS, ROXANA J
1226 IRIS CT
WESTON, FL 33326 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: ROXANA VARGAS 04/06/2016

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	D	Title	D
Name	JARAMA, SONIA CMRS.	Name	FACHIN PINEDO, CARLOS ASR
Address	6911 NW 87TH AVE	Address	6911 NW 87TH AVE
City-State-Zip:	MIAMI FL 33178	City-State-Zip:	MIAMI FL 33178

Title	CONTROLLER
Name	VARGAS, ROXANA J
Address	6911 NW 87TH AVE
City-State-Zip:	MIAMI FL 33178

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROXANA VARGAS CONTROLLER 04/06/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date