

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000244753

Entity Name: TROPICAL CITY SERVICES, LLC

Current Principal Place of Business:

930 TRUMAN AVENUE, STE 35
KEY WEST, FL 33040

Current Mailing Address:

930 TRUMAN AVENUE, STE 35
KEY WEST, FL 33040 US

FEI Number: 82-3570778

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROVKO, VLADYSLAV
930 TRUMAN AVENUE, STE 35
KEY WEST, FL 33040 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

Authorized Person(s) Detail :

Title AMBR
Name BROVKO, VLADYSLAV
Address 930 TRUMAN AVENUE, STE 35
City-State-Zip: KEY WEST FL 33040

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: VLADYSLAV BROVKO

AMBR

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date