2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2003
Secretary of State

DOCUMENT# L02000020933

Entity Name: TRICON DEVELOPMENT GROUP, L.L.C.

Current Principal Place of Business:

P.O. BOX 110306
HIALEAH, FL 33011 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 110306
HIALEAH, FL 33011 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QAMAR, IJAZ
5041 SOUTHERN BOULEVARD
WEST PALM BEACH, FL 33415 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: QAMAR, IJAZ
Address: P.O. BOX 110306
City-St-Zip: HIALEAH, FL 33011 US

Title: MGRM ( ) Delete
Name: QAMAR, ANISH
Address: P.O. BOX 110306
City-St-Zip: HIALEAH, FL 33011 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MR. QAMAR MGRM 03/01/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date