

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000043315

FILED  
Aug 31, 2005  
Secretary of State

Entity Name: TRI-LATERAL INVESTMENT AND MANAGEMENT INC.

**Current Principal Place of Business:**

P.O. BOX 370704  
MIAMI, FL 331370704

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 370704  
MIAMI, FL 331370704

**New Mailing Address:**

24 NE 47 STREET  
MIAMI, FL 331370704

FEI Number: 51-0463966

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JEROME, SCHILLER  
1720 N.W. 179 TERR.  
MIAMI, FL 33056 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: JEROME, SCHILLER  
Address: 1720 N.W. 179 TERR.  
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete  
Name: JEROME, SCHILLER  
Address: 1720 N.W. 179 TERR.  
City-St-Zip: MIAMI, FL 33056

Title: CFO ( ) Delete  
Name: THERMITUS, MANOUCHEKA  
Address: 7634 N.E. 3RD CT.  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: THERMITUS, MANOUCHEKA  
Address: 7634 N.E. 3RD CT.  
City-St-Zip: MIAMI, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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 an address, with all other like empowered.

SIGNATURE: SCHILLER JEROME

CEO

08/31/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date