2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# P04000024680

Entity Name: TRINITY ACCOUNTING & INSURANCE GROUP, INC.

Current Principal Place of Business:

10045 BELVEDERE ROAD
SUITE 11
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

10045 BELVEDERE ROAD
SUITE 11
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 20-0698209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAM, ARJUNE
7631 LASALLE BLVD
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

BELLEZZA, VITO A
7975 ROCKFORD RD
BOYNTON BEACH, FL 33472 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: VITO A BELLEZZA 01/07/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RAM, ARJUNE
Address: 8122 JOLLY HARBOUR COURT
City-St-Zip: WELLINGTON, FL 33414

Title: VP ( ) Delete
Name: GARIB, VIDIA
Address: 7631 LASALLE BLVD
City-St-Zip: MIRAMAR,, FL 33023

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RAM, ARJUNE
Address: 10525 JEPSON ST
City-St-Zip: ORLANDO, FL 32825

Title: VP (X) Change ( ) Addition
Name: GARIB, VIDIA
Address: 10525 JEPSON ST
City-St-Zip: ORLANDO,, FL 32825

Title: DIR ( ) Change (X) Addition
Name: BELLEZZA, VITO A
Address: 7975 ROCKFORD RD
City-St-Zip: BOYNTON BEACH, FL 33472

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ARJUNE RAM P 01/07/2009
Electronic Signature of Signing Officer or Director Date