## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000102261

Entity Name: TRICIRCLE CORP

City-St-Zip:

KEY BISCAYNE, FL 33143

FILED Apr 30, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
5582 NE 4TH COURT				151 CRANDON BOULEVARD,		
SUITE 5 MIAMI, FL 33137				404 KEY BISCAYNE, FL 33149		
Current Mailing Address:				New Mailing Address:		
5582 NE 4TH COURT				151 CRANDON BLVD KEY COLONY		
SUITE 5 MIAMI, FL 33137				404 KEY BISCAYNE, FL 33149		
FEI Number:		FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
LEGA, JOSE C MR. 5582 NE 4TH COURT				LEGA, JOSE C MR. 151 CRANDON BLVD KEY COLONY		
SUITE 5 MIAMI, FL 33137 US				404 KEY BISCAYNE, FL 33149 US		
The above in the State		submits this statement for the p	urpose o	f changing its registere	ed office or registered agent, or both,	
SIGNATURE: JOSE CAMILO LEGA				04/30/2008		
	Electro	nic Signature of Registered Age	nt		Date	
Election Can	npaign Financir	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P/D ( LEGA, DENISE 5582 NE 4TH 0 MIAMI, FL 33	COURT		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP/D ( LEGA, JOSE 0 5582 NE 4TH 0 MAIMI, FL 33	COURT		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	LEGA, MARGA	) Delete RRITA MS NBLVB (APT 404)		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: JOSE CAMILO LEGA MR 04/30/2008