

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114760

FILED
May 03, 2005
Secretary of State

Entity Name: TRINITARIA I, INC.

Current Principal Place of Business:

1500 SAN REMO AVE
SUITE 103
CORAL GABLES, FL 33146

New Principal Place of Business:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134

Current Mailing Address:

1500 SAN REMO AVE
SUITE 103
CORAL GABLES, FL 33146

New Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33146

FEI Number: 05-0541471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARED AND ASSOCIATES, P.A.
1500 SAN REMO AVE
SUITE 103
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA
2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 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: ANTONIO GARCIA

05/03/2005

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: D () Delete
Name: LONDONO, GUILLERMO
Address: 1500 SAN REMO AVE #103
City-St-Zip: CORAL GABLES, FL 33146

Title: S () Delete
Name: LONDONO, GINA
Address: 1500 SAN REMO AVE #103
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LONDONO, GUILLERMO
Address: 2121 PONCE DE LEON BLVD. SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134

Title: S (X) Change () Addition
Name: LONDONO, GINA
Address: 2121 PONCE DE LEON BLVD. SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134

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: GUILLERMO LONDONO

D

05/03/2005

Electronic Signature of Signing Officer or Director

Date