

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000028644

**Entity Name:** TRILIJ, INC.

**Current Principal Place of Business:**

75 N. WOODWARD AVE. #81683  
TALLAHASSEE, FL 32313

**Current Mailing Address:**

75 N. WOODWARD AVE. #81683  
TALLAHASSEE, FL 32313 US

**FEI Number: 81-2050722**

**Certificate of Status Desired: No**

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

REGISTERED AGENT, INC.  
7901 4TH STREET NORTH  
SUITE 300  
ST.PETERSBURG, FL 33702 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title S  
Name MCARDLE, CRISTINA S  
Address 11119 LAMMER LN  
City-State-Zip: OXFORD FL 34484

Title PRESIDENT  
Name PIETROPAOLI, PAT  
Address 75 N. WOODWARD AVE. #81683  
City-State-Zip: TALLAHASSEE FL 32313

Title VP  
Name MCARDLE, JAMES M  
Address 11119 LAMMER LN  
City-State-Zip: OXFORD FL 34484

*I hereby 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 all other like empowered.*

**SIGNATURE: CRISTINA MCARDLE**

**SECRETARY**

**04/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date