

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 684367

FILED
Mar 15, 2011
Secretary of State

Entity Name: TRINIDAD ENTERPRISES, INC.

Current Principal Place of Business:

18105 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 331621605

New Principal Place of Business:

Current Mailing Address:

18105 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 331621605

New Mailing Address:

FEI Number: 59-2028693 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TRINIDAD, JOSE H
17427 N.W. 66CT.
HIALEAH, FL 33015 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

OFFICERS AND DIRECTORS:

Title: PD
Name: TRINIDAD, JOSE H.
Address: 17427 NW 66 COURT
City-St-Zip: HIALEAH, FL 33015 US

Title: VD
Name: TRINIDAD, MIGUEL H.
Address: 2145 NE MIAMI GARDEN DR.
City-St-Zip: N. MIAMI BEACH, FL US

Title: SD
Name: LUNA, LILIANA J.
Address: 861 NE 182 STREET
City-St-Zip: N. MIAMI BEACH, FL 33162 US

Title: TD
Name: KLEIN, LILA
Address: 1900 NE 186 TH DRIVE
City-St-Zip: N MIAMI BEACH, FL US

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: JOSE TRINIDAD

PD

03/15/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date