LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT#

A02000001745

1. Entity Name

STAPLE CHECK HERE

SIGNATURE: By:

TRIGEANT EP, LTD.



FILED

03 APR 30 PM 12: 49

	DO NOT WRITI	E IN TUIC O	PAGE	SECRETARY OF STATE TALLAHASSEE FLORIDA			
2. Principal P	lace of Business	3. Mailing Address		U 30 DO NOT WRITE IN THIS SPACE			
3020 N. Suite, Apt. Suite 1		c/o William L. Rafferty, Jr., Suite Apt # etc. 1101 Brickell Ave., Ste. 1400		DIE DVMAVA			
City & State Boca Raton, FL		City & State Miami, FL		4. FEI Number - Applied For 59-3770916 Not Applied			
Zip 33431	Country USA	Zip33131	Country USA	5. Certificate of Status Desired . \$8.75 Additional Fee Required			
	7. Name and Address of Current Registered Agent						
DO NOT WRITE Name William L. Rafferty, Jr., Esq.							
		VRUE	Stroet Address (P.O. Box Number is Not Acceptable)				
	IN THIS S	PAGE	1101 Brickell Avenue, Suite 1400				
			City Miami	FL Zip Code 33131			
	named entity submits this statement ions of registered agent	for the purpose of changing its	registered office or register	red agent, or both, in the State of Florida. I am familiar with, and acce	ıpt		
SIGNATURE							
9. Capital Contributions as Shown on record. \$1,000.00 In FLORIDA to			al Contributions ate. \$1,000.	.00 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE	E		
,		THAT IS A BUSINESS EN	ITITY MUST BE REGIST	TERED AND ACTIVE WITH THIS OFFICE. It must be filed to charige a general partner.			
12. GENERAL PARTNER INFORMATION							
DOCUMENT #	L02000035095		CTREET ADDRESS				

427,277,477,477,477,477				
L02000035095 Trigeant EP, LLC	STREET ADDRESS	Eppo Transce		
3020 N. Military Trail, Ste. 100 Boca Raton, FL 33431	CITY-ST-ZIP	600017547656 04/30/0301028002 **255/10		
	STREET ADDRESS	./50,00		
	CITY-ST-ZIP			
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	STREET ADDRESS	IN THIS SPACE		
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	STREET ADDRESS			
	CITY-ST-ZIP			
	Trigeant EP, LLC 3020 N. Military Trail, Ste. 100	Trigeant EP, LLC 3020 N. Military Trail, Ste. 100 Boca Raton, FL 33431 STREET ADDRESS CITY-ST-ZIP STREET ADDRESS		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

TRIGEANT EP, LIM, General Partner

Date

800-998-9506

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Harry Sargeant, III

Daytime Phone #