

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03962

FILED  
Apr 22, 2011  
Secretary of State

Entity Name: TRIO ENGLEWOOD, INC.

**Current Principal Place of Business:**

2767 NORTH BEACH ROAD  
#208  
ENGLEWOOD, FL 342239119

**New Principal Place of Business:**

**Current Mailing Address:**

2767 NORTH BEACH ROAD  
#208  
ENGLEWOOD, FL 342239119

**New Mailing Address:**

FEI Number: 59-2029154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEJONGE, CORA  
2767 N BEACH ROAD  
# 208  
ENGLEWOOD, FL 34223 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: V  
Name: DE JONGE, G  
Address: 2767 N BEACH RD #208  
City-St-Zip: ENGLEWOOD, FL 34223

Title: P  
Name: DE JONGE, L  
Address: 2767 N BEACH RD #208  
City-St-Zip: ENGLEWOOD, FL 34223

Title: ST  
Name: DE JONGE, C  
Address: 2767 N BEACH ROAD, #208  
City-St-Zip: ENGLEWOOD, FL, FL 34223

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: C. DEJONGE

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

ST

04/22/2011

\_\_\_\_\_ Date