

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001104

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** TRI-EMERALD FINANCIAL GROUP, INC.

**Current Principal Place of Business:**

26250 ENTERPRISE COURT  
SUITE 230  
LAKE FOREST, CA 92630

**New Principal Place of Business:**

**Current Mailing Address:**

26250 ENTERPRISE COURT  
SUITE 230  
LAKE FOREST, CA 92630

**New Mailing Address:**

**FEI Number:** 06-1819106

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: DCEO  
Name: MCQUIGGAN, MICHAEL  
Address: 26250 ENTERPRISE COURT #230  
City-St-Zip: LAKE FOREST, CA 92630

Title: PD  
Name: KILE, RICAHRD  
Address: 26250 ENTERPRISE COURT #230  
City-St-Zip: LAKE FOREST, CA 92630

Title: SCFO  
Name: POUJADE, JACQUES  
Address: 26250 ENTERPRISE COURT #230  
City-St-Zip: LAKE FOREST, CA 92630

Title: D  
Name: POUJADE, JACQUES  
Address: 26250 ENTERPRISE COURT #230  
City-St-Zip: LAKE FOREST, CA 92630

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: MICHAEL MCQUIGGAN

CEO

01/05/2011

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

\_\_\_\_\_  
Date