

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # F97000002032

1. Entity Name
TRISTRAM, INC.



Principal Place of Business
301 YAMATO RD., #2215
BOCA RATON, FL 33431

Mailing Address
301 YAMATO RD., #2215
SUITE 2200
BOCA RATON, FL 33431



01182008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0746767

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TWIST, EDWIN A
301 YAMATO RD. SUITE 2200
BOCA RATON, FL 33431

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME TWIST, EDWIN B
STREET ADDRESS 301 YAMATO ROAD, STE 2200
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE T
NAME WEBSTER, KENNETH
STREET ADDRESS 301 YAMATO ROAD, STE 2200
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U00000801426
02/01/08-80017-023 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth S. Webster

1/24/08

Date

541-241-0018

Daytime Phone #