

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005585

Entity Name: TRENDIUM, INC.

FILED
Jan 28, 2004
Secretary of State

Current Principal Place of Business:

13450 W SUNRISE BLVD
SUITE 200
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

13450 W SUNRISE BLVD
SUITE 200
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 22-3672974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELEIS, DR. HANAFY
13450 W SUNRISE BLVD
SUITE 200
SUNRISE, FL 33323 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ZWAN, BRYAN
Address: 101 CONVENTION CENTER DR
City-St-Zip: LAS VEGAS, NV 89109

Title: T () Delete
Name: PHILLIPS, CHRIS
Address: 101 CONVENTION CENTER DR
City-St-Zip: LAS VEGAS, NV 89109

Title: D () Delete
Name: WANG, FRED
Address: 3000 SAND HILL ROAD-BLVD #1 #240
City-St-Zip: MENLO PARK, CA 94025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: ZWAN, DR. BRYAN
Address: 101 CONVENTION CENTER DR
City-St-Zip: LAS VEGAS, NV 89109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: MELEIS, DR. HANAFY
Address: 13450 W SUNRISE BLVD
City-St-Zip: SUNRISE, FL 33323

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DR. HANAFY MELEIS

PD

01/28/2004

Electronic Signature of Signing Officer or Director

_____ Date