

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K48105

Entity Name: TRIEX EXPORTERS, INC.

FILED
Oct 12, 2009
Secretary of State

Current Principal Place of Business:

507 WEST 17TH STREET
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

6163 MIAMI LAKES DRIVE EAST
MIAMI LAKES, FL 33014 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARD GARCIA, INC.
6163 MIAMI LAKES DRIVE EAST
MIAMI LAKES, FL 33014 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: EDWARD GARCIA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NOEL, GEOFFREY
Address: 840 WEST 19 STREET
City-St-Zip: HIALEAH, FL 33010

Title: D () Delete
Name: GARCIA, EDWARD
Address: 6163 MIAMI LAKES DRIVE EAST
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EDWARD GARCIA

D

10/12/2009

Electronic Signature of Signing Officer or Director

Date