

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030368

FILED
Apr 17, 2008
Secretary of State

Entity Name: TRINITY ONE BROKERS LLC

Current Principal Place of Business:

7040-25 SEMINOLE-PW
#133
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

7040-25 SEMINOLE-PW
#133
LOXAHATCHEE, FL 33470 US

New Mailing Address:

FEI Number: 51-0486934 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, GENIUS
7040-25 SEMINOLE-PW #133
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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WELLS, GENIUS
Address: 7040-25 SEMINOLE-PW #133
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: MGR () Delete
Name: BARRETT, THOMAS
Address: 7040-25 SEMINOLE-PW #133
City-St-Zip: LOXAHATCHEE, FL 33470 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GENIUS WELLS

MGR

04/17/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date