

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032831

FILED
May 01, 2005
Secretary of State

Entity Name: TRIMERGE CONSULTING GROUP LLC

Current Principal Place of Business:

4933 SW 171 TERRACE
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 278315
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 20-0192243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LAZARRE, GERALDINE
1265 NE 155 STREET
MIAMI, FL 33162 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/MEMBERS:

Title: MGRM () Delete
Name: LAZARRE, GERALDINE
Address: 1265 NE 155 STREET
City-St-Zip: MIAMI, FL 33162

Title: MGRM () Delete
Name: MAHONEY-BROWN, KRISTINA
Address: 4933 SW 171 TERRACE
City-St-Zip: MIRAMAR, FL 33027

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 for the exemption stated in Section 119.07(3)(i), 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: KRISTINA MAHONEY-BROWN

MGRM

05/01/2005

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