

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072166

Entity Name: TRIDENT HOLDINGS, LLC

FILED
Apr 12, 2005
Secretary of State

Current Principal Place of Business:

1820 NORTH CORPORATE LAKES BLVD, STE 207
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1820 NORTH CORPORATE LAKES BLVD, STE 207
WESTON, FL 33326

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:

MARTINEZ, ISABEL
PREMIER GLOBAL CONSULTING
1835 MAIN STREET, STE 101
WESTON, FL 33326 US

Name and Address of New Registered Agent:

MARTINEZ, ISABEL
1820 N CORPORATE LAKES BLVD, SUITE 207
WESTON, FL 33326 US

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: ISABEL MARTINEZ

04/12/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: MORENO, GLAYDIBEL
Address: 1820 NORTH CORPORATE LAKES BLVD., STE 207
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: ELIOPOULOS, GEORGES
Address: 1820 NORTH CORPORATE LAKES BLVD., STE 207
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MORENO, GLADYS
Address: 1820 NORTH CORPORATE LAKES BLVD., STE 207
City-St-Zip: WESTON, FL 33326

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: ISABEL MARTINEZ

RA

04/12/2005

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