

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006191

FILED
Apr 29, 2009
Secretary of State

Entity Name: TRI-STRONG INC.

Current Principal Place of Business:

247 SW 8TH STREET
#269
MIAMI, FL 33130

New Principal Place of Business:

2451 BRICKELL AV.
SUITE 17 P
MIAMI, FL 33129

Current Mailing Address:

247 SW 8TH STREET
#269
MIAMI, FL 33130

New Mailing Address:

2451 BRICKELL AV.
SUITE 17 P
MIAMI, FL 33129

FEI Number: 20-4979229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEZA, JUAN
247 SW 8TH STREET
#269
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

ROCHA, JOSE DR
2451 BRICKELL AV.
SUITE 17 P
MIAMI, FL 33129 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: JOSE ROCHA

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEZA, JUAN
Address: 247 SW 8TH STREET #269
City-St-Zip: MIAMI, FL 33130

Title: S (X) Delete
Name: ANDREIA, DOLABELLA
Address: 247 SW 8TH STREET #269
City-St-Zip: MIAMI, FL 33130

Title: V (X) Delete
Name: LAUREDO, ROD
Address: 247 SW 8TH STREET #269
City-St-Zip: MIAMI, FL 33130

Title: T (X) Delete
Name: OSAWA, TAK
Address: 247 SW 8TH STREET #269
City-St-Zip: MIAMI, FL 33130

Title: D (X) Delete
Name: VEGA, VENUS
Address: 247 SW 8TH STREET #269
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: ROCHA, JOSE
Address: 2451 BRICKELL AV. SUITE 17 P
City-St-Zip: MIAMI, FL 33129

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE ROCHA

DR

04/29/2009

Electronic Signature of Signing Officer or Director

Date