

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000067339

Entity Name: TRIAX MANAGEMENT, INC.

FILED
Jan 19, 2007
Secretary of State

Current Principal Place of Business:

515 N. FLAGLER DR., STE. 600
WEST PALM BEACH, FL 334014323

New Principal Place of Business:

501 S. FLAGLER DR., STE. 450
WEST PALM BEACH, FL 33401

Current Mailing Address:

515 N. FLAGLER DR., STE. 600
WEST PALM BEACH, FL 334014323

New Mailing Address:

501 S. FLAGLER DR., STE. 450
WEST PALM BEACH, FL 33401

FEI Number: 30-0075468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANDIDO, KRISTINA M ESQ.
515 N. FLAGLER DR., STE. 600
WEST PALM BEACH, FL 334014323 US

Name and Address of New Registered Agent:

CANDIDO, KRISTINA M ESQ.
501 S. FLAGLER DR., STE. 450
WEST PALM BEACH, FL 33401 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:

01/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CANDIDO, DOMINIC J
Address: 170 COYOTE CIRCLE
City-St-Zip: FEEDING HILLS, MA 01030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DOMINIC CANDIDO

D

01/19/2007

Electronic Signature of Signing Officer or Director

Date