

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027702

FILED
Jul 05, 2006
Secretary of State

Entity Name: TRIANA INVESTORS CORPORATION

Current Principal Place of Business:

6110 KIMBALL DRIVE
SPRING HILL, FL 34606

New Principal Place of Business:

59 LONE PINE
HOMOSASSA, FL 34446 US

Current Mailing Address:

6110 KIMBALL DRIVE
SPRING HILL, FL 34606

New Mailing Address:

59 LONE PINE
HOMOSASSA, FL 34446 US

FEI Number: 03-0403276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIANA, LARRY G
6110 KIMBALL DRIVE
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

TRIANA, LARRY G
59 LONE PINE
HOMOSASSA, FL 34446 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: LARRY G TRIANA

07/05/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: TRIANA, LARRY G
Address: 6110 KIMBALL DRIVE
City-St-Zip: SPRING HILL, FL 34606

Title: ST () Delete
Name: TRIANA, JANICE M
Address: 6110 KIMBALL CT.
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: TRIANA, LARRY G
Address: 59 LONE PINE
City-St-Zip: HOMOSASSA, FL 34446 US

Title: ST (X) Change () Addition
Name: TRIANA, JANICE M
Address: 59 LONE PINE
City-St-Zip: HOMOSASSA, FL 34446 US

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: LARRY G TRIANA

DPST

07/05/2006

Electronic Signature of Signing Officer or Director

Date