2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000059033

1. Entity Name

T.R.I.P. GROUP INTERNATIONAL, INC.



FILED
May 03, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

10881 SW 244TH TERR HOMESTEAD, FL 33032 10881 SW 244TH TERR HOMESTEAD, FL 33032



04262007

No Chg-P

CR2E034 (11/05)

4. FEI Number 36-2170443

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

RICARDO, NELSON 10881 SW 244TH TERR HOMESTEAD, FL 33032

DO NOT WRITE IN THIS SPACE

110 MEG 12 / 15 1 1 0 0 0 0 2			IN THIS SPACE		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agent and little i	fapplicable (NOTE, Register	ed Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO RICARDO, NELSON 10881 SW 244TH TERR HOMESTEAD, FL 33032				e e e e e e e e e e e e e e e e e e e
TITLE	STD		1		U00000759142
NAME	RICARDO, MARIA E				05/24/07-80030-017 150.00
STREET ADDRESS CITY-ST-ZIP	10881 SW 244TH TERR HOMESTEAD, FL 33032				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE NAME					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attaction that my name appears in Block 10 or Block 11 if changed, or on an attaction that my name appears in Block 10 or Block 11 if changed.

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF

NELSON RICARDO

PRESIDENT

04/27/07

(786), 344 4420

Daytime Phone #