

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086854

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: TRI - STAR LEADERSHIP, INC.

## Current Principal Place of Business:

771 N.W. 167 TERRACE  
MIAMI, FL 33169

## New Principal Place of Business:

## Current Mailing Address:

771 N.W. 167 TERRACE  
MIAMI, FL 33169

## New Mailing Address:

FEI Number: 47-0883535

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GALLON, STEVE III  
777 NW 167TH TERRACE  
MIAMI, FL 33169 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GALLON, STEVE III  
Address: 777 NW 167TH TERRACE  
City-St-Zip: MIAMI, FL 33169

Title: VP ( ) Delete  
Name: GALLON, STEVE IV  
Address: 771 N.W. 167 TERRACE  
City-St-Zip: MIAMI, FL 33169

Title: 2VP ( ) Delete  
Name: GALLON, KASTEVIA S  
Address: 771 N.W. 167 TERRACE  
City-St-Zip: MIAMI, FL 33169

Title: RS ( ) Delete  
Name: PICKETT, FREDRELLETTE  
Address: 1310 NW 88 ST  
City-St-Zip: MIAMI, FL 33147

Title: BM ( ) Delete  
Name: GALLON, VICKY  
Address: 771 N.W. 167 TERRACE  
City-St-Zip: MIAMI, FL 33169

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

Title: BM (X) Change ( ) Addition  
Name: GALLON, VIRGINIA  
Address: 771 N.W. 167 TERRACE  
City-St-Zip: MIAMI, FL 33169

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: STEVE GALLON III

PD

01/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date