

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000016580

Entity Name: TRINITY BEEF, INC.

FILED  
Apr 16, 2009  
Secretary of State

## Current Principal Place of Business:

3216 LITTLE ROAD  
NEW PORT RICHEY, FL 34655 US

## New Principal Place of Business:

## Current Mailing Address:

3216 LITTLE ROAD  
NEW PORT RICHEY, FL 34655 US

## New Mailing Address:

FEI Number: 81-0778835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

CONNOR, MATTHEW R  
13936 JACOBSON DRIVE  
ODESSA, FL 33556 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: MATTHEW CONNOR

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MELLODY, JAMES JR  
Address: 5205 CARLSAJA DRIVE  
City-St-Zip: VALRICO, FL 33597

Title: D (X) Delete  
Name: MASSARO, JOSEPH J  
Address: 6119 KINGBIRD MANOR  
City-St-Zip: LITHIA, FL 33947

Title: D (X) Delete  
Name: MELLODY, SEAN B  
Address: 2504 OBRAPIA STREET  
City-St-Zip: TAMPA, FL 33629

Title: O (X) Delete  
Name: CONNOR, MATTHEW  
Address: 13936 JACOBSON DRIVE  
City-St-Zip: ODESSA, FL 33356

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CONNOR, MATTHEW R  
Address: 13936 JACOBSON DRIVE  
City-St-Zip: ODESSA, FL 33556

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

SIGNATURE: MATTHEW CONNOR

D

04/16/2009

Electronic Signature of Signing Officer or Director

Date