2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017747

222 28 STREET, APT 2

MIAMI BEACH, FL 33140

Address:

City-St-Zip:

FILED Aug 07, 2006 Secretary of State

Entity Na	me: TRITON	ELECTRONICS & RETAIL, INC	O.			
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	DLLINS AVENI ACH, FL 3314					
Current Mailing Address:			New Maili	New Mailing Address:		
	DLLINS AVENI ACH, FL 3314					
FEI Number	: 37-1457980	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and	Address o	f New Registered Agent:	
2745-B CC	IA, NELSON DLLINS AVENI ACH, FL 3314					
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered Ag	ent	Date		
		93(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LUCANG, ALE 362-28TH STR MIAMI BEACH	EET#2 FL 33140	Title: Name: Address: City-St-Zip:		LINS AVENUE CH, FL 33140 US	
Title: Name: Address: City-St-Zip:	PD (X ARENABA, NE 2745-B COLLI MIAMI BEACH	NS AVENUE	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	S (X PLASENCIA, N 2745-B COLLI MIAMI BEACH	NS AVENUE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	T (X	() Delete	Title:		() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: NELSON ARENCIBIA PD 08/07/2006