2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000043315

Title:

Name:

Address:

City-St-Zip:

FEDAL INVESTMENT AND MANACEMENT INC

FILED Sep 17, 2007 Secretary of State

Entity Name: TRI-LATERAL INVESTMENT AND MANAGEMENT INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
24 NE 47 S MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
24 NE 47 S MIAMI, FL					
FEI Number:	51-0463966	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
JEROME, SCHILLER 1720 NW 179 TERRACE. MIAMI, FL 33056 US			JEROME, SCHILLER 24 NE 47 STREET MIAMI, FL 33137 US		
The above in the State		ubmits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: SCHILLER JEROME				09/17/2007	
	Electroni	c Signature of Registered Ager	nt	Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () I JEROME, SCHIL 1720 NW 179 TE MIAMI, FL 3305	RRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I JEROME, SCHIL 1720 N.W. 179 T MIAMI, FL 3305	ERR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO () I THERMITUS, MA 7634 N.E. 3RD C MIAMI, FL 3313	et.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SCHILLER JEROME CEO 09/17/2007

() Delete

THERMITUS, MANOUCHEKA

7634 N.E. 3RD CT.

MIAMI, FL 33138

() Change () Addition