2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058249

Entity Name: TRINITY LENDERS CORPORATION

FILED Feb 19, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

10710 NW 66 ST #206 10710 NW 66 STREET MIAMI, FL 33178

206

MIAMI, FL 33178

Current Mailing Address: New Mailing Address:

10710 NW 66 ST #206 10710 NW 66 STREET

MIAMI, FL 33178 206

MIAMI, FL 33178

FEI Number: 51-0467952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

ECHAVARRIA, JUANNIO A ECHAVARRIA, JUAN A 10710 NW 66 ST #206 10710 NW 66 STREET MIAMI, FL 33178 206

MIAMI, FL 33178

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: JUAN A. ECHAVARRIA 02/19/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

ECHAVARRIA, JUAN A ECHAVARRIA, JUAN A Name: Name: 10710 NW 66 ST #206 10710 NW 66 ST # 206 Address: Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33178

() Delete Title: Title: () Change (X) Addition GUERRERO, HILDEANA B Name: Name: Address: 10710 NW 66 STREET # 206 Address:

MIAMI, FL 33178 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change (X) Addition Name: ECHAVARRIA, JEFFREY A Name:

10710 NW 66 STREET # 206 Address Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33178

Title: () Delete Title: () Change (X) Addition ECHAVARRIA, ROSALIE A Name: Name:

Address: Address: 10710 NW 66 STREET # 206

City-St-Zip: City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUAN A. ECHAVARRIA D 02/19/2004