

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000074209

Entity Name: IMPRESOS TRILIP, INC.

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

2146 POLO GARDENS DR.
APT 204
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

2146 POLO GARDENS DR.
APT. 204
WELLINGTON, FL 33414

New Mailing Address:

P O BOX 15435
WEST PALM BEACH, FL 33416 US

FEI Number: 20-0074788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALFARO-JONES, ABELARDO
2146 POLO GARDENS DR.
APT. 204
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

ALFARO-JONES, ABELARDO
815 BELVEDERE RD
WEST PALM BEACH, FL 33405 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: HAYDEE PEREZ

01/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALFARO JONES, ABELARDO J
Address: 2146 POLO GARDENS DR. # 204
City-St-Zip: WELLINGTON, FL 33414 US

Title: V () Delete
Name: NANIA SOSA, ROSI E
Address: 2146 POLO GARDENS DR. # 204
City-St-Zip: WELLINGTON, FL 33414 US

Title: D () Delete
Name: GONZALEZ DEL C., MARGARITA
Address: 2146 POLO GARDENS DR. # 204
City-St-Zip: WELLINGTON, FL 33414 US

Title: M () Delete
Name: HERNANDEZ M., JOSE L
Address: 2146 POLO GARDENS DR # 204
City-St-Zip: WELLINGTON, FL 33414 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALFARO JONES, ABELARDO J
Address: P O BOX 15435
City-St-Zip: WEST PALM BEACH, FL 33416 US

Title: VP (X) Change () Addition
Name: NANIA SOSA, ROSI E
Address: P O BOX 15435
City-St-Zip: WEST PALM BEACH, FL 33416 US

Title: D (X) Change () Addition
Name: GONZALEZ DEL C., MARGARITA
Address: P O BOX 15435
City-St-Zip: WEST PALM BEACH, FL 33416 US

Title: M (X) Change () Addition
Name: HERNANDEZ M., JOSE L
Address: P O BOX 15435
City-St-Zip: WEST PALM BEACH, FL 33416 US

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: ABELARDO J ALFARO-JONES

P

01/11/2008

Electronic Signature of Signing Officer or Director

Date