

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000090345

Entity Name: TRIFUSION DESIGNS INC.

FILED
Apr 01, 2005
Secretary of State

Current Principal Place of Business:

12202 N. 22ND ST
#1034
TAMPA, FL 33612

New Principal Place of Business:

PO BOX 5355
TAMPA, FL 33675

Current Mailing Address:

12202 N. 22ND ST
#1034
TAMPA, FL 33612

New Mailing Address:

PO BOX 5355
TAMPA, FL 33675

FEI Number: 20-1220675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRIE MOORE
12202 N. 22ND ST
#1034
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

CARRIE MOORE
1902 S. 48TH ST.
TAMPA, FL 33619 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: CARRIE MOORE

04/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOORE, CARRIE A
Address: 12202 N. 22ND ST #1034
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOORE, CARRIE A
Address: PO BOX 5355
City-St-Zip: TAMPA, FL 33675

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: CARRIE MOORE

PRES

04/01/2005

Electronic Signature of Signing Officer or Director

Date