2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000107177

FILED Oct 18, 2007 Secretary of State

Entity Nam	ie: TRI US FIN	NANCIAL INC			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
13890 NW 6 TH CT MIAMI, FL 33168 US			13890 NW 6C TH CT MIAMI, FL 33150 L		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 68 MIAMI, FL					
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
SWINDLE, TERRENCE A PO BOX 681078 MIAMI, FL 33168 US			SWINDLE, TERRENC 9101 NW 7TH AVE 5A MIAMI, FL 33150 US	5A	
The above in the State		bmits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: TS				10/18/2007	
	Electronic	Signature of Registered Agen	t	Date	
		2)(b), F.S., the corporation did not Frust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () C SWINDLE, TERR PO BOX 681078 MIAMI, FL 33168		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () D SWINDLE, TERR PO BOX 681078 MIAMI, FL 33168		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.

SIGNATURE: TS Ρ 10/18/2007