

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000054611

FILED  
May 11, 2009  
Secretary of State

Entity Name: TRI TECH RESTORATION & REMODELNG, INC.

## Current Principal Place of Business:

6187 SHIRLEY ST  
#2  
NAPLES, FL 34109 US

## New Principal Place of Business:

## Current Mailing Address:

6187 SHIRLEY ST  
#2  
NAPLES, FL 34109 US

## New Mailing Address:

FEI Number: 20-5180509

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLAIACOMO, ALYSSA  
6187 SHIRLEY ST.  
#2  
NAPLES, FL 34109 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: COLAIACOMO, DENISE  
Address: 2820 CYPRESS TRACE CIRCLE # 2012  
City-St-Zip: NAPLES, FL 34119 US

Title: DS ( ) Delete  
Name: COLAIACOMO, ALYSSA A  
Address: 8294 KEY ROYAL CIRCLE #1623  
City-St-Zip: NAPLES, FL 34119 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALYSSA COLAIACOMO

PRES

05/11/2009

Electronic Signature of Signing Officer or Director

Date