

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024711

FILED
Apr 19, 2008
Secretary of State

Entity Name: TRENCIN ENTERPRISES, INC

Current Principal Place of Business:

2338 IMMOKALEE RD.
#101
NAPLES, FL 34110

New Principal Place of Business:

6610 CHESTNUT CIR.
NAPLES, FL 34109

Current Mailing Address:

2338 IMMOKALEE RD.
#101
NAPLES, FL 34110

New Mailing Address:

6610 CHESTNUT CIR.
NAPLES, FL 34109

FEI Number: 20-8661239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOURICK, DAVID J
10998 BONITA BEACH RD
SUITE 2
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

SLOBODA, MARGARET
6610 CHESTNUT CIR.
NAPLES, FL 34109 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: MARGARET SLOBODA

04/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLOBODA, MICHAL MR
Address: 2338 IMMOKALEE RD. #101
City-St-Zip: NAPLES, FL 34110

Title: ST () Delete
Name: SLOBODA, MARGARET
Address: 6610 CHESTNUT CIR
City-St-Zip: NAPLES, FL 34109

Title: V () Delete
Name: SLOBODA, FRANK
Address: 6610 CHESTNUT CIR
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SLOBODA, MICHAL MR
Address: 6656 MANGROVE WAY
City-St-Zip: NAPLES, FL 34109

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: MARGARET SLOBODA

ST

04/19/2008

Electronic Signature of Signing Officer or Director

Date