2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000036573

Entity Name: TRAIGALO.COM, CORP

FILED Apr 30, 2008 Secretary of State

Entity Nai	me: TRAIGAL	J.COM, CORP					
Current Principal Place of Business:				New Principal Place of Business:			
8881 S.W. 131 STREET MIAMI, FL 33176				8333 N.W. 68 STREET MIAMI, FL 33166			
Current Mailing Address:				New Mailing Address:			
8881 S.W. 131 STREET MIAMI, FL 33176				8333 N.W. 68 STREET MIAMI, FL 33166			
FEI Number:	: 45-0555450	FEI Number Applied For ()	FEI Numb	er Not Appli	cable ()	Certificate	e of Status Desired ()
Name and	Address of C	urrent Registered Agent:	N	Name and	Address of	New Regi	stered Agent:
MORRISO 8040 S.W. MIAMI, FL	132 STREET						
	named entity see of Florida.	submits this statement for the p	purpose of o	changing it	s registered	l office or re	gistered agent, or both,
SIGNATUR	RE:						
	Electron	ic Signature of Registered Ag	ent				Date
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () MORRISON, AN 8040 S.W. 132 MIAMI, FL 3315	STREET	۸ <u>م</u>	ītle: lame: lddress: City-St-Zip:		() Change() Addition
Title: Name: Address: City-St-Zip:	LEON, ALEJANI	REET APT. #511	۸ <u>م</u>	ītle: lame: lddress: Dity-St-Zip:	VP LEON, ALEJA 225 27 STR MIAMI BEAC	EET) Addition
Title: Name: Address: City-St-Zip:	T () MORRISON, AN 8040 S.W. 132 MIAMI, FL 3315	STREET	۸ <u>م</u>	Title: Jame: Address: Dity-St-Zip:		()Change() Addition
Title: Name: Address: City-St-Zip:	LEON, ALEJANI	REET APT. #511	۸ م	Title: Name: Nddress: Dity-St-Zip:	S LEON, ALEJA 225 27 STRE MIAMI BEAC	ET) 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: ANGEL MORRISON P 04/30/2008