

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000051362

Entity Name: TRIFUN, INC.

FILED
Nov 08, 2009
Secretary of State

Current Principal Place of Business:

3330 N FEDERAL HWY
LIGHTHOUSE POINT, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

3330 N FEDERAL HWY
LIGHTHOUSE POINT, FL 33064 US

New Mailing Address:

FEI Number: 20-8934477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESTES, TIGHE
3330 N FEDERAL HWY
LIGHTHOUSE POINT, FL 33064 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: TIGHE ESTES

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: PD () Delete
Name: ESTES, TIGHE
Address: 3330 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: VD (X) Delete
Name: ESTES, TAGUE
Address: 2895 N.E. 33RD CT # 2
City-St-Zip: FORT LAUDERDALE, FL 33306 US

Title: TD () Delete
Name: ESTES, TROY
Address: 2895 N.E. 33RD COURT
City-St-Zip: FORT LAUDERDALE, FL 33306 US

Title: SD () Delete
Name: ESTES, JAN
Address: 2895 N.E. 33RD CT # 3
City-St-Zip: FORT LAUDERDALE, FL 33306 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: TIGHE ESTES

Electronic Signature of Signing Officer or Director

PD

11/08/2009

Date