2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

DOCUMENT# P08000072443

Entity Name: TRINITY INSURANCE BROKERAGE CORP.

Current Principal Place of Business:

2190 NW 91 AVE
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

2190 NW 91 AVE
PEMBROKE PINES, FL 33029 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CUPIDON, LOURDES L
2190 NW 191 ST AVE
PEMBROKE PINES, FL 33029 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: CUPIDON, LOURDES L
Address: 2190 NW 191 AVE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: V.P
Name: CRYSTAL J CUPIDON, VICE PRESIDENT
Address: 2190 NW 191 AVE.
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby 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 all other like empowered.

SIGNATURE: LOURDES CUPIDON PRES 05/01/2012

Electronic Signature of Signing Officer or Director Date