## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000090740

Entity Name: TRIFIVE, CORP.

**FILED** Feb 25, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2625 WESTON RD 3020 NW 125TH AVE WESTON, FL 33331

216

SUNRISE, FL 33323

**Current Mailing Address: New Mailing Address:** 

2625 WESTON RD 3020 NW 125TH AVE WESTON, FL 33331 SUNRISE, FL 33323

FEI Number: 27-1278826 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUERRINI, ALBA GUERRINI, ALBA 3221 NW 126TH TERRACE 2625 WESTON RD

WESTON, FL 33331 US SUNRISE, FL 33323

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: ALBA GUERRINI 02/25/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

TRISINI RAUCCI, SANTOS A Name: 3221 NW 126TH TERRACE Address: City-St-Zip: SUNRISE, FL 33323

Title: VD

Name: TRISINI. ALFREDO

3020 NW 125TH AVE NUM 216 Address:

SUNRISE, FL 33323 City-St-Zip:

Title:

RAUCCI DE TRISINI, COSTANZA Name: 3020 NW 125TH AVE NUM 216 Address:

City-St-Zip: SUNRISE, FL 33323

Title:

TRISINI RAUCCI, WILLIAM Name: Address: 3020 NW 125TH AVE NUM 216

City-St-Zip: SUNRISE, FL 33323

Title:

TRISINI RAUCCI, ANA C Name: Address: 3020 NW 125TH AVE NUM 216

SUNRISE, FL 33323 City-St-Zip:

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: SANTOS TRISINI RAUCCI PD 02/25/2011