

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000004326

Entity Name: TRIO EAST, INC

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

10300 SOUTHSIDE BLVD  
1540A  
JACKSONVILLE, FL 32256

## **Current Mailing Address:**

10300 SOUTHSIDE BLVD  
1540A  
JACKSONVILLE, FL 32256

## **New Principal Place of Business:**

10300 SOUTHSIDE BLVD EAST  
2060  
JACKSONVILLE, FL 32256

## **New Mailing Address:**

10300 SOUTHSIDE BLVD EAST  
2060  
JACKSONVILLE, FL 32256

FEI Number: 27-1722731

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

KHALED, MOHAMMED A  
5882 GREEN POND DR  
JACKSONVILLE, FL 32256 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: P  
Name: KHALED, ALAA M  
Address: 5882 GREEN POND DR  
City-St-Zip: JACKSONVILLE, FL 32256

Title: TS  
Name: KHALED, MOHAMMAD A  
Address: 5882 GREEN POND DR  
City-St-Zip: JACKSONVILLE, FL 32256

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: MOHAMMED A KHALED

TS

03/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date