

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000025584

FILED
Apr 15, 2009
Secretary of State

Entity Name: TRIARCH INVESTMENT GROUP, INC.

Current Principal Place of Business:

18205 BISCAYNE BLVD, SUITE 2202
AVENTURA, FL 33160 US

New Principal Place of Business:

18205 BISCAYNE BLVD,
2202
AVENTURA, FL 33160 US

Current Mailing Address:

18205 BISCAYNE BLVD, SUITE 2202
AVENTURA, FL 33160 US

New Mailing Address:

18205 BISCAYNE BLVD,
2202
AVENTURA, FL 33160 US

FEI Number: 65-0684252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINKEWER, JORGE
18205 BISCAYNE BLVD, SUITE 2202
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

LINKEWER, JORGE
18205 BISCAYNE BLVD,
2202
AVENTURA, FL 33160 US

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: _____

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HALBERSTEIN, DANIEL
Address: 18205 BISCAYNE BLVD, SUITE 2202
City-St-Zip: AVENTURA, FL 33160 US

Title: VD () Delete
Name: GROSFELD, MARIO
Address: 18205 BISCAYNE BLVD, SUITE 2202
City-St-Zip: AVENTURA, FL 33160 US

Title: STD () Delete
Name: LINKEWER, JORGE
Address: 18205 BISCAYNE BLVD, SUITE 2202
City-St-Zip: AVENTURA, FL 33160 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:

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: MARIO GROSFELD

VD

04/15/2009

Electronic Signature of Signing Officer or Director

Date