

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000072416

Entity Name: TRUP INC.

FILED
Jul 10, 2009
Secretary of State

Current Principal Place of Business:

106 SAINT GEORGE STREET
STE B
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

106 SAINT GEORGE STREET
STE B
SAINT AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 59-3406950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMIN, TRUPTI S
106 ST GRORGE ST
STE B
ST AUGUSTINE, FL 32084 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: D () Delete
Name: AMIN, TRUPTI S
Address: 106 ST GRORGE ST
City-St-Zip: ST AUGUSTINE, FL 32084

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: AMIN, SUNIL S
Address: 106 ST.GEORGE ST
City-St-Zip: ST AUGUSTINE, FL 32084

Title: D () Change (X) Addition
Name: AMIN, ULLAS S
Address: 106 ST.GEORGE ST
City-St-Zip: ST.AUGUSTINE, FL 32084

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: TRUPTI AMIN

D

07/10/2009

Electronic Signature of Signing Officer or Director

Date