FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000073359 (7) 1. Corporation Name TREILLAGE INC. Principal Place of Business Mailing Address					
1671 BRANDYWINE #2222 WEST PALM BEACH FL 33409		1671 BRANDYWINE #2222 West Palm Beach Fl 33409-2083			
TIEST TREM	SERVICE SOUR	1000 11am 95 101 12	••••		Date of Last Report
				08/30/1996	
2. Principal #	Place of Business	2a. Mailing Address		4. FEI Number 650 69 6761	Applied For Not Applicable
Sulte, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & Stato		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30)	B. This corporation has liability for intang Florida Statutes ☐ Yes	ible tax under s. 199.032,
	9. Name and Address of Curr			10. Name and Address of New Register	ed Agent
	SARIO, SKY		81 Name		
	1 BRANDYWINE #2222		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
WEST PALM BEACH FL 33409			83		
·			63		
			84 City		85 Zip Code
agent 1 a SIGNATURE	am familiar with, and accept the obl	igations of, Section 607.0505, F	lorida Statutes. 11: Registered Apent signature requi		E
12.	OFFICERS A	ND DIRECTORS DELETE	13. 1.1 TOLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	DE SARIO, SKY	E) vittie	1.2 NAME		CT Overige CT Manual
STREET ADDRESS	1671 BRANDYWINE #2222		1.3 STREET ADDRESS		
CITY-ST-Z#P	WEST PALM BEACH FL 334	09	1.4 CITY-ST-ZIP		
TITLE	V	DELETE	2.1 TITLE		Change Additio
NAME	MOMAN, MATT		2.2 NAME		
STREET ADDRESS	1671 BRANDYWINE #2222 WEST PALM BEACH FL 334	ΛΛ	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	WEST FALM DEACH FL 334	DELETE	2.4 CITY - ST - ZIP 3.1 TITLE		Change Additio
NAME		Lad Octob	3.2 NAME		El cusullo El Montio
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP]		3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Additio
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		ET cuttings ET Woulds
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST- ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	; ;	1
STREET ADDRESS			6.3 STREET ADDRESS	:	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Apr 15 1997 8:00am

Secretary of State