

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047884

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: TRIAL EXHIBITION DESIGN, INC.

## Current Principal Place of Business:

211 NW 5TH AV.  
SUITE 3  
HALLANDALE, FL 33009

## New Principal Place of Business:

709 SIENA PALM DRIVE  
CELEBRATION, FL 34747

## Current Mailing Address:

211 NW 5TH AV.  
SUITE 3  
HALLANDALE, FL 33009

## New Mailing Address:

709 SIENA PALM DRIVE  
CELEBRATION, FL 34747

FEI Number: 65-0922361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RIVEROS, JAIME  
16413 SAPPHIRE ST.  
WESTON, FL 33331 US

## Name and Address of New Registered Agent:

RIVEROS, JAIME  
709 SIENA PALM DR  
CELEBRATION, FL 34747 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: JAIME RIVEROS

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RIVEROS, JAIME H  
Address: 211 NW 5TH AV.  
City-St-Zip: HALLANDALE, FL 33009

Title: VD ( ) Delete  
Name: ROZO, CLAUDIA M  
Address: 211 NW 5TH AV  
City-St-Zip: HALLANDALE, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RIVEROS, JAIME H  
Address: 709 SIENA PALM DRIVE  
City-St-Zip: CELEBRATION, FL 34747

Title: VD (X) Change ( ) Addition  
Name: ROZO, CLAUDIA M  
Address: 709 SIENA PALM DRIVE  
City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAIME RIVEROS

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date