

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000110680

Entity Name: TRIEN & ASSOCIATES, INC.

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1591 BREAKWATER TERRACE  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

**Current Mailing Address:**

1591 BREAKWATER TERRACE  
HOLLYWOOD, FL 33019

**New Mailing Address:**

FEI Number: 65-1058559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TRIENT, SOFIA  
1591 BREAKWATER TERRACE  
HOLLYWOOD, FL 33019 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: TRIEN, STEPHEN R  
Address: 1591 BREAKWATER TERRACE  
City-St-Zip: HOLLYWOOD, FL 33019

Title: TS/D  
Name: TRIEN, SOFIA  
Address: 1591 BREAKWATER TERRACE  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D  
Name: BLAKLEY, JOHN C  
Address: 11501 SW 92 COURT  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: REINGOWSKY, ARKADY S  
Address: 2861 N 38 AVE  
City-St-Zip: HOLLYWOOD, FL 33021

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: SOFIA TRIEN

TS/D

02/21/2011

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

\_\_\_\_\_  
Date