

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S29586

Entity Name: TRALIS, INC.

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

2351 SOUTH SEACREST BLVD
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

1900 GLADES ROAD
SUITE 401
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 65-0242605 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENKHAUS, DAVID J
1900 GLADES RD..
SUITE 401
BOCA RATON, FL 33431 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: DEGEROME, JAMES H
Address: 1422 S.E. ATLANTIC DRIVE
City-St-Zip: LANTANA, FL 33462

Title: PD () Delete
Name: DOSCH, MARK R
Address: 4615 PINE TREE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: V () Delete
Name: SHANMUGAN, NIRMALA
Address: 1325 SO. CONGRESS AVE #211
City-St-Zip: BOYNTON BEACH, FL 33426

Title: DT () Delete
Name: IBANEZ, EDGAR
Address: 4407 WOODFIELD BLVD
City-St-Zip: BOCA RATON, FL 33434

Title: V () Delete
Name: STRIPPOLI, ANTHONY
Address: 1325 SO. CONGRESS AVE #211
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: MUELLER, GEORGE L
Address: 3180 POLO DRIVE
City-St-Zip: GULFSTREAM, FL 33483

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:

Title: () Change () Addition
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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: MARK DOSCH

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date