

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000004677

**FILED  
Jan 19, 2018  
Secretary of State  
CC5275892076**

**Entity Name:** TRIFECTA ORLANDO I, INC.

**Current Principal Place of Business:**

28035 DOROTHY DRIVE  
SUITE 240  
AGOURA HILLS, CA 91301

**Current Mailing Address:**

28035 DOROTHY DRIVE  
SUITE 240  
AGOURA HILLS, CA 91301 US

**FEI Number: 26-0790257**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PSD  
Name NUSSBAUM, BRUCE  
Address 28035 DOROTHY DRIVE, SUITE 240  
City-State-Zip: AGOURA HILLS CA 91301

Title PTD  
Name LAM, RON  
Address 28035 DOROTHY DRIVE, SUITE 240  
City-State-Zip: AGOURA HILLS CA 91301

Title PD  
Name AUGER, MICHAEL  
Address 28035 DOROTHY DRIVE, SUITE 240  
City-State-Zip: AGOURA HILLS CA 91301

*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: BRUCE NUSSBAUM**

**CO-PRESIDENT**

**01/19/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date