## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L99656

Entity Name: TRIPLE C SERVICES, INC.

FILED Feb 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2040 NW 40TH CRT 1 2040 NW 40TH CRT #1

POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064

Current Mailing Address: New Mailing Address:

2040 NW 40TH CRT 1 2040 NW 40TH CRT #1

POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064

FEI Number: 65-0215677 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KENNEDY, SYBIL T.

2040 NW 40TH CT 1

KENNEDY, SYBIL T.

2040 NW 40TH CT #1

POMPANO BEACH, FL 33064 US POMPANO BEACH, FL 33064 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: SYBIL T KENNEDY 02/01/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

 Title:
 DP
 ( ) Delete

 Name:
 KENNEDY, MICHAEL A.,, JR.

 Address:
 2040 NW 40TH COURT

 City-St-Zip:
 POMPANO BEACH, FL

 Title:
 DST () Delete

 Name:
 KENNEDY, SYBIL T.,

 Address:
 2040 NW 40TH COURT

 City-St-Zip:
 POMPANO BEACH, FL

Title: DVP ( ) Delete
Name: KENNEDY, MICHAEL A.,, SR.
Address: 2040 NW 40TH COURT
City-St-Zip: POMPANO BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KENNEDY, MICHAEL A.,, JR.
Address: 2040 NW 40TH COURT #1
City-St-Zip: POMPANO BEACH, FL

Title: DST (X) Change ( ) Addition

Name: KENNEDY, SYBIL T.,
Address: 2040 NW 40TH COURT #1
City-St-Zip: POMPANO BEACH, FL

Title: DVP (X) Change () Addition Name: KENNEDY, MICHAEL A.,, SR. Address: 2040 NW 40TH COURT #1 City-St-Zip: POMPANO BEACH, FL

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: SYBIL T KENNEDY DST 02/01/2009