

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000092064 (9)
1. Corporation Name
~~XXXXXXXXXXXXXXXXXXXX~~
Triple Team, Inc. *M/C 2-26-98*



Principal Place of Business: 18201 DAYBREAK DR. BOCA RATON FL 33496
Mailing Address: 18201 DAYBREAK DR. BOCA RATON FL 33496

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified: 10/27/1997

2. Principal Place of Business:
21 3014 Dunlin Road
22 Suite, Apt. #, etc.
23 City & State: Delray Beach, FL
24 Zip: 33444 25 County: Palm Bch.
26 3014 Dunlin Road
27 City & State: Delray Beach, FL
28 Zip: 33444 29 County: Palm Bch.

4. FEI Number: 65-0789781
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
JABLOW, BENJAMIN A
1680 FRUITVILLE RD., STE. 102
SARASOTA FL 34236

10. Name and Address of New Registered Agent
81 Name: Arthur F. Beck
82 Street Address (P.O. Box Number is Not Acceptable): 3014 Dunlin Road
83
84 City: Delray Beach FL 85 Zip Code: 33444

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE: *Arthur F. Beck* Arthur Beck, Pres. 3/19/89
(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BECK, ROBERT A II	
STREET ADDRESS	18201 DAYBREAK DR.	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Arthur Beck	
1.3 STREET ADDRESS	3014 Dunlin Road	
1.4 CITY-ST-ZIP	Delray Beach, FL 33444	
2.1 TITLE	DIST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Lynn Beck	
2.3 STREET ADDRESS	3014 Dunlin Road	
2.4 CITY-ST-ZIP	Delray Beach, FL 33444	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Arthur Beck* Arthur Beck 3/19/89 FL-215 2951

CR2E034 (10/97)