## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: Maria C. Terranda SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Mar 27, 2006 8:00 am Secretary of State

DOCUMENT # S68619  1. Entity Name TRIPLE CROWN INTERNATIONAL, INC.					03-27-2006 90262 029 ***150.00			
Principal Place of Business 10891 SW 26TH ST MIAMI, FL 33165		Mailing Address 10891 SW 26TH ST MIAMI, FL 33165		4003	4003 <b>9</b> 7 <b>9</b> 6			
2. Principal Place of Bysiness 13005 CORDITATO TONE Suite, Apt. #, etc.		3. Mailing Address 13005 LORON 3 ANS Suite, Apt. #, etc.		ANE 03212006	Chg-P	CR2E034 (11/05)		
City & State	Country FL	City & State No cath MI Ami Zip Cot	TL JADE	4. FEI Numbe 64-041 5. Certificate				
6. Name and Address of Current Registered Agent FERNANDEZ, JORGE F 10891 SW 26TH ST MIAMI, FL 33165				7. Name and Address of New Registered Agent  Name FERNANdez, Jorge F.  Street Address (P.O. Box Number is Not Acceptable)  13005 CORONAD LANE				
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees								
10. TITLE	OFFICERS AND D	<del></del> +_	LE 1	705	_	CERS AND DIRECTORS	S IN 11	
NAME Street adoress City-St-Zip	FERNANDEZ, JORGE F 10891 SW 26TH ST MIAMI, FL 33165	ST	REET ADDRESS	ERNAND 13005 C	Deonado			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD FERNANDEZ, MARIA C 10891 SW 26TH ST MIAMI, FL 33165	NA STI	REET ADDRESS	ISD FERNANDE 3095 CC JORTO MIE	うちもろかりつ	C. LANE 33181	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NA STI	ile Ime Réet adoress IY-ST-21P		<b>\</b>	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NA STI	ILE IME REET ADDRESS TY+ST-ZIP		-	Change	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP		NA Sti	ILE IME REET ADDRESS TY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NA STI	TLE IME REET ADDRESS TY-ST-ZIP			☐ Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								

Szech 21, 2006