

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J04358

1. Entity Name

TRIPLE "R" CONTRACTORS, INC.

R

Principal Place of Business

6310 S.W. 172 AVE
FT. LAUDERDALE FL 33331

Mailing Address

6310 S.W. 172 AVE
FT. LAUDERDALE FL 33331

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2668460

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TILLEMANN, JOANNE
6310 SW 172 AVE.
FT. LAUDERDALE FL 33331

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
TILLEMANN, RICHARD E.
6310 S.W. 172 AVE
FT. LAUDERDALE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
TILLEMANN, JOANNE
6310 S.W. 172 AVE
FT. LAUDERDALE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature Deleted

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jul 17, 2000 8:00 am
Secretary of State

07-17-2000 90006 017 ***150.00



DO NOT WRITE IN THIS SPACE

CR20034 15/00

Attachment
D# J04358
DOW 10313

July 10, 2000

Triple "R" Contractors Inc.
6310 SW 172 Ave.
Ft. Lauderdale, FL 33331

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Subject: Not Receiving First Notice.

For some reason I did not receive my First notice to pay my Corporate fee. I have always paid this on time in the past and have never been late (4/28/95, 4/11/96, 2/28/97, 4/21/98, and 3/31/99). I talked to one of your agents and explained to him (Robert) that I did not received the first notice and he instructed me to send in the \$150.00 fee along with this letter and that the penalty would be waved. I appreciate your time with this matter and if you need to contact me please call me at (954) 434-1414

Thank You



Rick Tilleman