1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 393262

TRIPLE "E" SELF-SERVICE WAREHOUSES, INC.

Mailing Address Principal Place of Business 1325 WINROCK BLVD 4120 10TH AVE HOUSTON TX 77057 TAMPA FL 33605 US

## FILED Mar 04, 1999 8:00 am **Secretary of State**

03-04-1999 90022 012 \*\*\*150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/28/1971 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 7517 RIVERDIEW WAY Not Applicable 59-1485130 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired · 🗆 Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing TEXAS Trust Fund Contribution Added to Fees 23 TOUSTON Country 8. This corporation owes the current year Intangible Zip Country Ves □No 77063 30 USA Personal Property Tax. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name EUBANKS, RALPH C. SR. Street Address (P.O. Box Number is Not Acceptable) 82 3804 DANA SHORES BLVD. **TAMPA FL 33634** 83 Zip Code 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS DELETE 1.1 TITLE TITLE PD 1.2 NAME EUBANKS, W L JR NAME 7517 RIVETUIEN Way 1325 WINROCK BLVD 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOUSTON TX 1.4 CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2:4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3,4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 41 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY ST-ZIP Change Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF Addition ☐ DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 resceiver 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, with all other like empowered.

SIGNATURE:

6. EUBANKS JR 1-10-99 713

CR2E034 (11/98)