

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028239

FILED
Mar 24, 2009
Secretary of State

Entity Name: TRIPLET POWER, LLC

Current Principal Place of Business:

6555 NOVA DR., SUITE 308
DAVIE, FL 33317

New Principal Place of Business:

Current Mailing Address:

322 N. 32ND AVENUE
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-0128385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILAR, PATRICK
999 PONCE DE LEON BLVD., PH 1120
PH 1120
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BROMLEY, NICOLE
Address: 322 N. 32 AVENUE
City-St-Zip: HOLLWOOD, FL 33021

Title: MGR () Delete
Name: BROMLEY, DELMAR
Address: 4589 PHEASANT CT.
City-St-Zip: DUBLIN, CA 94568

Title: MGR () Delete
Name: BROMLEY, CANDICE
Address: 322 N. 32ND AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR () Delete
Name: BROMLEY, HEATHER
Address: 322 N. 32ND AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR () Delete
Name: BROMLEY, CAREY
Address: 4589 PHEASANT CT.
City-St-Zip: DUBLIN, CA 94568

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NICOLE M BROMLEY

MGR

03/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date