

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000121152

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** TRIPLE A D ENTERPRISES, LLC

**Current Principal Place of Business:**

123 S HWY 1792  
DEBARY, FL 32713

**New Principal Place of Business:**

**Current Mailing Address:**

123 S HWY 1792  
DEBARY, FL 32713

**New Mailing Address:**

FEI Number: 27-4170497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOQUE, M.D.  
950 B GROVE HELMET WAY  
DELAND, FL 32720 US

**Name and Address of New Registered Agent:**

HOQUE, M.D.  
1345 ROLLING RIVER DR  
DELAND, FL 32720 US

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: MD HOQUE

03/14/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HOQUE, M.D.  
Address: 1345 ROLLING RIVE DR  
City-St-Zip: DELAND, FL 32720

I hereby 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: M D HOQUE

MGRM

03/14/2012

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