

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000004630

Entity Name: TRIPLE SAFETY NNNET, LLC

FILED
Feb 24, 2011
Secretary of State

Current Principal Place of Business:

6727 JOHNNYCAKE ROAD, STE #B
WINDSOR MILL, MD 21244

New Principal Place of Business:

Current Mailing Address:

6727 JOHNNYCAKE ROAD, STE #B
WINDSOR MILL, MD 21244

New Mailing Address:

FEI Number: 36-4653321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOATRIGHT, SCOTT R ESQ
6101 GAZEBO PARK PLACE N. STE 103
JACKSONVILLE, FL 32257 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: MGRM
Name: SHEIKH, AAMIR
Address: 6727 JOHNNYCAKE ROAD, STE #B
City-St-Zip: WINDSOR MILL, MD 21244

Title: MGRM
Name: SHEIKH, AASMA
Address: 6727 JOHNNYCAKE ROAD, STE #B
City-St-Zip: WINDSOR MILL, MD 21244

Title: MGRM
Name: SHEIKH, MANZOOR
Address: 6727 JOHNNYCAKE ROAD, STE #B
City-St-Zip: WINDSOR MILL, MD 21244

Title: MGRM
Name: SHEIKH, WASIMA
Address: 6727 JOHNNYCAKE ROAD, STE #B
City-St-Zip: WINDSOR MILL, MD 21244

Title: MGRM
Name: TORI, EDMUND
Address: 6727 JOHNNYCAKE ROAD, STE #B
City-St-Zip: WINDSOR MILL, MD 21244

Title: MGRM
Name: WADE, APRIL
Address: 6727 JOHNNYCAKE ROAD, STE #B
City-St-Zip: WINDSOR MILL, MD 21244

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: WASIMA SHEIKH

MGRM

02/24/2011

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