2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000069777

FILED Apr 30, 2004 Secretary of State

Entity Name: 3 T'S INC. **Current Principal Place of Business: New Principal Place of Business:** 7044 MIDDLEBURY DR BOYNTON BCH, FL 33436 **Current Mailing Address: New Mailing Address:** 7044 MIDDLEBURY DR BOYNTON BCH, FL 33436 FEI Number: 59-3729914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTIN, JOSEPH 7044 MIÓDLEBURY DR BOYNTON BCH, FL 33436 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition HINTON, TA'VECA HINTON, TA'VECA Name: Name: 7044 MIDDLEBURY DR 7044 MIDDLEBURY DR Address: Address: City-St-Zip: BOYNTON BCH, FL 33436 City-St-Zip: BOYNTON BCH, FL 33436 Title:

Title: DV () Delete Title: DP (X) Change () Addition Name: HINTON, TIFFANY Name: HINTON, TIFFANY

Name:HINTON, TIFFANYName:HINTON, TIFFANYAddress:7044 MIDDLEBURY DRAddress:7044 MIDDLEBURY DRCity-St-Zip:BOYNTON BCH, FL 33436City-St-Zip:BOYNTON BCH, FL 33436

Title: DT () Delete Title: () Change () Addition

 Name:
 ATKINSON, TERRENCE
 Name:

 Address:
 7044 MIDDLEBURY DR
 Address:

 City-St-Zip:
 BOYNTON BCH, FL 33436
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIFFANY HINTON DP 04/30/2004