

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000113764

Entity Name: TRIPLE BBB, INC.

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

18540 NW 48 PLACE  
MIAMI, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

18540 NW 48 PLACE  
MIAMI, FL 33055

**New Mailing Address:**

FEI Number: 65-1156438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUIZ, MANUEL  
18540 NW 48 PLACE  
MIAMI, FL 33055 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RUIZ, MANUEL  
Address: 18540 NW 48 PLACE  
City-St-Zip: MIAMI, FL 33055

Title: VPD  
Name: RUIZ, MIRIAM  
Address: 18540 NW 48 PLACE  
City-St-Zip: MIAMI, FL 33055

Title: SD  
Name: HIDALGO, MORAIMA  
Address: 18600 NW 48 PLACE  
City-St-Zip: MIAMI, FL 33055

I hereby 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 all other like empowered.

SIGNATURE: MANUEL RUIZ

PD

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date