

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000103869

Entity Name: TRIPLETS, INC.

FILED
Mar 25, 2008
Secretary of State

Current Principal Place of Business:

710 7TH STREET
APT #12A
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

315 N. ASSOCIATED RD
#1604
BREA, CA 92821

New Mailing Address:

27529 MARTA LANE
#203
SANTA CLARITA, CA 91387

FEI Number: 75-3083272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOR, JOEL
16130 RIO DEL PAZ
DELRAY BCH, FL 33446 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DIFILIPPO, THEODORE
Address: 315 N. ASSOCIATED RD APT #1604
City-St-Zip: BREA, CA 92821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DIFILIPPO, THEODORE
Address: 27529 MARTA LANE #203
City-St-Zip: SANTA CLARITA, CA 91387

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 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: THEODORE DIFILIPPO

MR

03/25/2008

Electronic Signature of Signing Officer or Director

_____ Date