

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087906

Entity Name: TRIPLE D SERVICES, INC.

FILED  
May 06, 2005  
Secretary of State

## Current Principal Place of Business:

5850 SW 52ND TERRACE  
DAVIE, FL 33314

## New Principal Place of Business:

## Current Mailing Address:

5850 SW 52ND TERRACE  
DAVIE, FL 33314

## New Mailing Address:

FEI Number: 61-1455867

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIS, HAROLD  
5850 SW 52ND TERRACE  
DAVIE, FL 33314 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DAVIS, HAROLD  
Address: 5850 SW 52ND TERRACE  
City-St-Zip: DAVIE, FL 33314

Title: VD ( ) Delete  
Name: DAVIS, GREGORY  
Address: 5850 SW 52ND TERRACE  
City-St-Zip: DAVIE, FL 33314

Title: STD ( ) Delete  
Name: DAVIS, GEORGE  
Address: 5850 SW 52ND TERRACE  
City-St-Zip: DAVIE, FL 33314

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: GEORGE DAVIS

STD

05/06/2005

Electronic Signature of Signing Officer or Director

Date