

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111807

FILED
Aug 30, 2005
Secretary of State

Entity Name: TRIPLE S ENTERPRISES OF NORTH FLORIDA, INC.

Current Principal Place of Business:

12566 ROCK ROSE LANE
JACKSONVILLE, FL 32225

New Principal Place of Business:

4475 INDUSTRIAL PARK RD
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

2959 RUSSELL OAKS DR
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

4475 INDUSTRIAL PARK RD
GREEN COVE SPRINGS, FL 32043

FEI Number: 41-2114806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCIARTELLI, NICK
12566 ROCK ROSE LANE
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

SCIARTELLI, NICK
2959 RUSSELL OAKS DR
GREEN COVE SPRINGS, FL 32043 US

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: NICK SCIARTELLI

08/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCIARTELLI, NICK
Address: 12566 ROCK ROSE LANE
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCIARTELLI, NICK
Address: 2959 RUSSELL OAKS DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: NICK SCIARTELLI

MR

08/30/2005

Electronic Signature of Signing Officer or Director

Date