

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000003504

**FILED**  
**Nov 07, 2006**  
**Secretary of State**

**Entity Name:** TRIPLE D WOODWORKING, INC.

**Current Principal Place of Business:**

7335 FRANK REEDER ROAD  
PENSACOLA, FL 32526 US

**New Principal Place of Business:**

**Current Mailing Address:**

7335 FRANK REEDER ROAD  
PENSACOLA, FL 32526 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

KAHIAPO, DANIEL K JR.  
7335 FRANK REEDER ROAD  
PENSACOLA, FL 32526 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: P ( ) Delete  
Name: KAHIAPO, DANIEL K JR.  
Address: 7335 FRANK REEDER ROAD  
City-St-Zip: PENSACOLA, FL 32526 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP ( ) Change (X) Addition  
Name: KAHIAPO, DANIEL K SR.  
Address: 10230 REBEL RD.  
City-St-Zip: PENSACOLA, FL 32526 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL K. KAHIAPO, JR.

P

11/07/2006

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

\_\_\_\_\_  
Date