

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046818

FILED
Apr 30, 2007
Secretary of State

Entity Name: TRIPLE A LINES, INC.

Current Principal Place of Business:

10400 SW 108TH AVE APT #A213
MIAMI, FL 33176

New Principal Place of Business:

5308 BENJAMIN AVENUE
BOYNTON BEACH, FL 33437

Current Mailing Address:

10400 SW 108TH AVE APT #A213
MIAMI, FL 33176

New Mailing Address:

5308 BENJAMIN AVENUE
BOYNTON BEACH, FL 33437

FEI Number: 43-2078750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASHMAN, ALBERT
10400 SW 108TH AVE APT #A213
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

ASHMAN, ALBERT A
5308 BENJAMIN AVENUE
BOYNTON BEACH, FL 33437 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: ALBERT ASHMAN

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ASHMAN, MARINA
Address: 10400 SW 108TH AVE APT #A213
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ASHMAN, ALBERT A
Address: 5308 BENJAMIN AVENUE
City-St-Zip: BOYNTON BEACH, FL 33437

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: ALBERT A, ASHMAN

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date