2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052632

Entity Name: TRIPLE D HURRICANE MASTERS, INC.

O'NEIL, CHRISTOPHER

9940 SW 4TH STREET

PLANTATION, FL 33324

Name:

Address: City-St-Zip: FILED Apr 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5740 SURREY CIRCLE EAST 5700 WASHINGTON ST. DAVIE, FL 33331 HOLLYWOOD, FL 33023 **Current Mailing Address: New Mailing Address:** 5740 SURREY CIRCLE EAST DAVIE, FL 33331 FEI Number: 20-4744548 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPDIRECT AGENTS, INC. 515 EAST PARK AVE TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DANIELSON, KENNETH Name: Name: 5740 SURREY CIRCLE EAST Address: Address: **DAVIE, FL 33331** City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BESHOURI, PETER Name: Name: 2900 N ATLANTIC BLVD Address: Address: FT LAUDERDALE, FL 33308 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KENNETH L DANIELSON SECY 04/19/2007