FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000066112 (0)

TRIPLE	A - H, INC.			I INDUMANI NE YANAN ANKIN ANINI ANINI BANKI DOMA)
Principal Place	e of Business	Mailing Address			
6721 W NORVELL BRYANT HWY CRYSTAL RIVER FL 34429 6721 W NORVELL BRYANT HWY CRYSTAL RIVER FL 34429				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	0 01 7.00
2 Principal Pl	ace of Business	2a. Mailing Address		08/25/1995 4. FEI Number	Applied For
21	202 0. 2051005	26		59-3332739	Not Applicable
Suite, Apt. I	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	.	City & State		Election Campalgn Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip	Country 30	This corporation owes or has paid the operational Property Tax due June 30.	current year Intangible
	9. Name and Address of Cur		1	10. Name and Address of New Registers	d Agent
MIN	MARD, LARENA		81 Name		
6731 W NORVELL BRYANT HWY CRYSTAL RIVER FL 34429			100 00000	82 Street Address (P.O. Box Number is Not Acceptable)	
			82 Street A		
On	TOTAL NIVER FL 34429		83		
			84 City	F	85 Zip Code
SIGNATURE .	to the provisions of Sections 607 (segistered agent, or both, in the St m familiar with, and accept the ob-		es, the above-named cauthorized by the corporida Statutes. E. Registered Agent aignature re	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap-	of changing its registered ppointment as registered
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 FITLE		Change Addition
NAME	MINIARD, LARENA		1.2 NAME		
STREET ADDRESS	6721 W NORVELL BRYANT	T HWY	1.3 STREET ADDRESS		
CITY-ST-ZIP	CRYSTAL RIVER FL		1.4 CITY-ST-ZIP		
TITLE	V	- SELETE	2.1 TITLE	·	∠hange ☐ Addition
NAME	DANNY T. STRUNK		2.2 NAME		
STREET ADDRESS		T HWY	2.3 STREET ADDRESS		
	6721 W NORVELL BRYANT	T HWY	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
City - St - ZIP		T HWY	2.4 CITY-ST-ZIP 3.1 TITLE	<u> </u>	☐ Change
STREET ADDRESS CITY-ST-ZIP TITLE NAME	6721 W NORVELL BRYANT CRYSTAL RIVER FL S	_	2.4 CITY-ST-ZIP 3.1 TITLE	S Kuvin Frekth	
CITY-ST-ZIP TITLE	6721 W NORVELL BRYANT CRYSTAL RIVER FL S PATRICK KELLEY	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	S Kevin Foskett 6721 W. Homell ann	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	6721 W NORVELL BRYANT CRYSTAL RIVER FL S PATRICK KELLEY 6721 W NORVELL BRYANT	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	S Kevin Foskett 10721 W. Norvell Bryan Crustal River D. 3W	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	6721 W NORVELL BRYANT CRYSTAL RIVER FL S PATRICK KELLEY	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	S Kevin Foskett 10721 W. Norvell Bryan Crystal River 76 34	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	6721 W NORVELL BRYANT CRYSTAL RIVER FL S PATRICK KELLEY 6721 W NORVELL BRYANT	T HWY	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	S Kevin Foskett 6721 W. Horvell Bryan Crystal River Fi 34	474 44 44

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

TITLE

NAME

CRYSTAL RIVER FL

Horaver Crais

4/28/98 352-564-1555

Addition

Addition

Change

FILED

May 07 1998 8:00am

Secretary of State