

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000099789 (5)

1. Corporation Name

TRIPLE H ENTERPRISES OF S.W. FLORIDA, INC.

Principal Place of Business

**2112 MISSION DRIVE
NAPLES FL 34109**

Mailing Address

**2112 MISSION DRIVE
NAPLES FL 34109**

2. Principal Place of Business

21 3838 N Tamiami Trail

Suite, Apt. #, etc.

22 Suite 414

City & State

23 Naples, FL

Zip

24 34103

Country

25

2a. Mailing Address

26 3838 N Tamiami Trail

Suite, Apt. #, etc.

27 Suite 414

City & State

28 Naples, FL

Zip

29 34103

Country

30

9. Name and Address of Current Registered Agent

**SZEMPRUCH, DAVID J
5129 CASTELLO DRIVE
SUITE 2
NAPLES FL 34103**

81 Name

John R. Hurley, Esquire

82 Street Address (P.O. Box Number is Not Acceptable)

5051 Castello Drive

83

Suite 202

84 City

Naples

FL

85 Zip Code

34103

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

John R. Hurley

November 7, 1997

DATE

12. OFFICERS AND DIRECTORS

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President/Director	☐ Change ☐ Addition
12 NAME	Lyle Preest	
13 STREET ADDRESS	3838 N Tamiami Trail, Suite 414	
14 CITY-ST-ZIP	Naples, FL 34103	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby 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.

SIGNATURE:

APPROVED
AND
FILED

97 NOV 17 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 99
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	12/05/1996	3a. Date of Last Report	N/A
4. FEI Number	06 700 5679	Applied For	☐ Not Applicable
5. Certificate of Status Desired	☒	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution	☐	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☒ No		
10. Name and Address of New Registered Agent			

CR2E034 (4/97)