Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

□No

☐ Yes

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800006908

1. Corporation Name

TRIPLE J INVESTORS, INC.					
Principal Place of Business	Mailing Address	1 1461160t tem iffent fatte fille i fatte fille			
3467 S.W. 59TH PLACE FORT LAUDERDALE FL 33312	3467 S.W. 59TH PLACE FORT LAUDERDALE FL 33312	DO NOT WRITE IN THIS SPAC			
	•	3. Date Incorporated or Qualifed 01/22/1998			
2. Principal Place of Business 21 1950 Plunkett Street	2a. Mailing Address 1950 Plunkett Street	4. FEI Number 65-0807269			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired F			
City & State Hollywood, FL	City & State Hollywood, FL	6. Election Campaign Financing Trust Fund Contribution \$5			
Zip Country 24 33020 25 USA	Zip Country 29 33020 30 USA	8. This corporation owes the current year Intangible Personal Property Tax.			
	Current Registered Agent	10. Name and Address of New Registered Agent			
FEINBERG, JEFFREY 4000 HOLLYWOOD BLVD. SUITE 350-N	81 Name 82 Street 83	Address (P.O. Box Number is Not Acceptable)			

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90061 038 ***150.00



FEINBERG, JEFFREY		82	Ctroot	Address (P.O. Box Number is Not Acceptable)						
4000 HOLLYWOOD BLVD.		02	Street	Address (P.O. Box Number is Not Acceptable)						
SUIT	E 350-N		83							
HOLI	LYWOOD FL 33021			0		les!	Zip Co	do		
			84	City	F	85	zip Cu	lue		
11. Pursuant to the provisions of Sections 607 per 2 and 607.1508, Florida Statutes, the about					corporation submits this statement for the purpose of	f changin	g its re	gistered		
office or registered agent, and accept the appointment as registered agent. I am amiliar unit, and accept the appointment as registered agent. I am amiliar unit, and accept the office of florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am amiliar unit, and accept the obligations of section 607.0505, Florida Statutes.										
4/2/99										
SIGNATURE Signature: 19 a grant thanner regulared agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE:										
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	S IN 12		
TITLE	D	DELETE	1.1 TITLE		D	X Cha	nge	Addition		
NAME	ROADFUSS, JOHN		1.2 NAME		Roadfuss, John			1		
STREET ADDRESS	3467 S.W. 59TH PLACE		1.3 STREET	ADDRESS	1950 Plunkett Street					
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		1.4 CITY-ST	r-ZiP	Hollywood, FL 33020					
TITLE	D	DELETE	2.1 TITLE			Cha	nge	☐ Addition		
NAME	HERSTIK, JARED		2.2 NAME					Ì		
STREET ADDRESS	1050 TANGER COURT		2.3 STREET	ADDRESS			-			
CITY-ST-ZIP	KINGSTON SPRINGS TN 37082		2. 4 CITY-S	T- ZIP						
uure .	D	☐ DELETE	3.1 TITLE			☐ Cha	nge	Addition		
NAME	GLIDEWELL, JOHN		3.2 NAME					\		
STREET ADDRESS	440 WEST MACON STREET		3.3 STREET	ADDRESS				Ì		
CITY-ST-ZIP	DECATUR IL 62522		3.4. CITY-S	T-ZIP						
TILE		☐ DELETE	4.1 TITLE			Cha Cha	nge	☐ Addition		
NAME			4.2 NAME					,		
STREET ADDRESS			4.3 STREET	ADDRESS				. }		
CITY-ST-ZIP			4.4 CITY-S1	r-zip						
TITLE	,	☐ DELETE	5.1 TITLE			☐ Cha	nge	☐ Addition		
NAME			5.2 NAME					Ì		
STREET ADDRESS			5.3 STREET	ADDRESS						
CITY-ST-ZIP			5.4 CITY-S	r-zip						
TITLE * '-)	THE WILLIAM STATE OF THE STATE	DELETE	6.1 TITLE			☐ Cha	nge	☐ Addition		
NAME 4	a state		6.2 NAME					1		
STREET ADDRESS	CREATIONS IN CO.		6.3 STREET	ADDRESS						
	Epilol Changy		6.4 CITY-ST	T-ZIP						
					1: Deal - AAD DEIDNEY Florida Chabana 1 feedbase o	_4:6.44				

I 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 of supplier ental 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 or an attachment with an address, with all other like empowered.

SIGNATURE: