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

PROFIT CORPORATION ANNUAL REPORT.



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

P98000091326 DOCUMENT #

SEVEN TRIPLE

ENTERTAINMENT INC

Principal Place of Business Mailing Address NW 55 ct. 20624 SAME 33055 MIAMI, FI DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed LOT# 860 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation owes the current year Intangible □No 24 Personal Property Tax. 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 83 City Zip Code 84 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change Addition DELETE 1.1 TITLE TITLE PRESIDENT SUAREZ LOCANDO 1.2 NAME NAME soesy wasset. STREET ADDRESS 1.3 STREET ADDRESS 33055 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIF Addition DELETE ☐ Change TITLE 3.1 TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CtTY-ST-ZIP Addition ☐ Change DELETE 4.1 TITLE TITLE

CITY-ST-ZIP 14. 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 or supplied with this him globes not quality for the exemption stated in Section 13.00 (O/ft). Included as it 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 appears, with all other like empowered.

4. 2 NAME

5.1 TITLE 52 NAME

6.1 TITLE

62 NAME

DELETE

☐ DELETE

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

☐ Change

Addition

Addition

FILED

Jun 19, 1999 8:00 am

**Secretary of State** 

06-19-1999 90002 027 \*\*\*150.00

577911-90002-27 P98-000091-3-2-6 TO WHOME IT MAY CONCERN. I MOVED OUT OF THE AREA OF P.O. BOX 830995 - MIAMI, F/A. 33125 \$ CHANGED MY MAIL to 20624 NW 55 ct. could WONDEHING IF I AND DAY WITHOUT PENALTY, I WILL BE LIVING AT THE NEW ADDRESS FOR NOW. PLEASE SEND TRIPLE SEVEN ENTERTAINMENT INC. ZOGZY NW 55 Ct. OPALOCICA FL. 33055 CONTACT # (305) 474-0052