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Feb 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S20787 (5)

1. Corporation Name
TRRR, INC.

Principal Place of Business
380 NORTH BAYSHORE BLVD.
#207
CLEARWATER FL 34619

Mailing Address
PO BOX 4953
CLEARWATER FL 34618-4953
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified
12/21/1990

3a. Date of Last Report
01/30/1996

4. FEI Number

59-3041990

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

HEFTER, TODD
380 NORTH BAYSHORE BLVD.
#207
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV
NAME AGEE, RODNEY
STREET ADDRESS 534-A S GLENWOOD AVE
CITY-ST-ZIP CLEARWATER FL

TITLE DS
NAME HEFTER, RALPH
STREET ADDRESS 534-A S GLENWOOD AVE
CITY-ST-ZIP CLEARWATER FL

TITLE DV
NAME HEFTER, RICHARD
STREET ADDRESS 380 N BAYSHORE BLVD #207
CITY-ST-ZIP CLEARWATER FL

TITLE DPT
NAME HEFTER, TODD
STREET ADDRESS 380 N BAYSHORE BLVD #207
CITY-ST-ZIP CLEARWATER FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS 1690-C N. HERCULES AVE
14 CITY-ST-ZIP CLEARWATER, FL 34625

21 TITLE
22 NAME
23 STREET ADDRESS 1690-C N. HERCULES AVE
24 CITY-ST-ZIP CLEARWATER, FLORIDA 34625

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
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:

Todd Hefter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Todd Hefter - President

1/25/97

Date

813-725-3022

Daytime Phone #

CR2E034 (9/96)