

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000252333

**Entity Name:** TRIPLE T TAXES, LLC

**Current Principal Place of Business:**

3425 NW 44 AVE SUITE 206  
LAUDERDALE LAKES, FL 33309

**Current Mailing Address:**

3425 NW 44 AVE SUITE 206  
LAUDERDALE LAKES, FL 33309

**FEI Number:** 84-3423640

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KIRNES, THEOTIS JR  
3425 NW 44 AVE SUITE 206  
LAUDERDALE LAKES, FL 33309 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title P  
Name KIRNES, THEOTIS JR  
Address 3425 NW 44 AVE SUITE 206  
City-State-Zip: LAUDERDALE LAKES FL 33309

Title VP  
Name DELOATCH, NATASHA S  
Address 3425 NW 44 AVE SUITE 206  
City-State-Zip: LAUDERDALE LAKES FL 33309

Title TREA  
Name KIRNES, THEOTIS JR  
Address 3425 NW 44 AVE SUITE 206  
City-State-Zip: LAUDERDALE LAKES FL 33309

Title SEC  
Name DELOATCH, NATASHA S  
Address 3425 NW 44 AVE SUITE 206  
City-State-Zip: LAUDERDALE LAKES FL 33309

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NATASHA DELOATCH

VP

04/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date