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**95 APR 25 AM 11:05**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 856767 (9)**

1. Corporation Name  
**TRANSLAGIC CORP.**

Principal Place of Business <b>10825 EAST 47TH AVE. DENVER CO 80239</b>	Mailing Address <b>10825 EAST 47TH AVE. DENVER CO 80239</b>
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified <b>06/14/1983</b>	3a. Date of Last Report <b>05/01/1994</b>
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number <b>84-0911610</b>	Applied For <input type="checkbox"/> Not Applicable
23 City & State	28 City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
24 Zip	29 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
25	30	7. This corporation has liability for intangible tax under E. 109.033, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
<b>FL</b> 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS	
TITLE	<b>POO</b>
NAME	<b>MAHONEY, JOHN T</b>
STREET ADDRESS	<b>2525 BALTUSROL LANE</b>
CITY - ST - ZIP	<b>EVERGREEN CO</b>
TITLE	<b>VST</b>
NAME	<b>RASMUSSEN, ROBERT L.</b>
STREET ADDRESS	<b>5770 GREEN OAKS DR.</b>
CITY - ST - ZIP	<b>EVERGREEN CO</b>
TITLE	<b>DO</b>
NAME	<b>RASMUSSEN, ROBERT L.</b>
STREET ADDRESS	<b>5770 GREEN OAKS DR.</b>
CITY - ST - ZIP	<b>EVERGREEN CO</b>
TITLE	<b>VO</b>
NAME	<b>KEGLEY, CHARLES F.</b>
STREET ADDRESS	<b>6122 SONGBIRD CIR.</b>
CITY - ST - ZIP	<b>BOULDER CO</b>
TITLE	<b>D</b>
NAME	<b>HARTWIG, LUTZ</b>
STREET ADDRESS	<b>7303 NEUHAUSEN, A.D.F.</b>
CITY - ST - ZIP	<b>GERMANY</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 the 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 thereto.

SIGNATURE: **BRENDAN C. PROTTY** Assistant Secretary **4/19/95** **303-371-7770**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR