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**Jul 02 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 # F93000002226 (9)
1. Corporation Name
FLUID SYSTEMS CORPORATION



Principal Place of Business Mailing Address
**10054 OLD GROVE ROAD
SAN DIEGO CA 92131** **10054 OLD GROVE ROAD
SAN DIEGO CA 92131-1647**

3. Date Incorporated or Qualified **05/12/1993** 3a. Date of Last Report **05/01/1996**
4. FEI Number **22-3011666** 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

**BUONASSISI, JOHN
384 SEMINOLE DR.
VENICE FL 34293**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	WIJMARK, GORAN	
STREET ADDRESS	STUREPLAN 3	
CITY-ST-ZIP	STOCKHOMM SW	
TITLE	D	<input type="checkbox"/> DELETE
NAME	NIELD, ANDY S.	
STREET ADDRESS	ANGLIAN HOUSE, AMBURY ROD	
CITY-ST-ZIP	HUNTINDON CA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MATTHEWS, PETER	
STREET ADDRESS	ANGLIAN HOUSE, AMBURY RD	
CITY-ST-ZIP	HUNTINDON CA	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	COLLINS, WILLIAM L	
STREET ADDRESS	10054 OLD GROVE RD	
CITY-ST-ZIP	SAN DIEGO CA 32131	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	LIGHT, WILLIAM G	
STREET ADDRESS	10054 OLD GROVE ROAD	
CITY-ST-ZIP	SAN DIEGO CA 92131	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GREEN, JOHN	
STREET ADDRESS	ANGLIAN HOUSE, AMBURY ROAD	
CITY-ST-ZIP	HUNTINDON	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Truby, Randolph L.	
1.3 STREET ADDRESS	11451 Alts Way	
1.4 CITY-ST-ZIP	Escondido, CA 92026	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Eckford, Tony	
2.3 STREET ADDRESS	Anglian House, Ambury Road	
2.4 CITY-ST-ZIP	Huntingdon, Cambs. PE18 6NZ UK	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Foreman, Gerald E.	
3.3 STREET ADDRESS	12331 Hill Country Drive	
3.4 CITY-ST-ZIP	Poway, CA 92064	
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 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 _____ DATE **6/19/97** **619/695-3840**

CR2E034 (9/96)