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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400049080 (2) TRI-MOTION INDUSTRIES, INC.					T NATURAL NA 1800 BURU BRU BRU BR	III Alik Dake Bere	18411 F8181 1841 8811 1881
Principal Pla 5688 W. CR TAMPA FL		Mailing Address 5688 W. CRENSHAW TAMPA FL 33634					
2. Principal	Place of Business				3. Date Incorporated or Qualified 06/24/1994		of Last Report 10/1995
21		2a. Mailing Address	-		4. FEI Number		Applied For
Suite, Api	t.#, etc.	Suite, Apt. #, etc.			59-3251913		Not Applicable
City & Sta	ite	City & State			Certificate of Status Desired		\$8.75 Additional Fee Required
[23]	·	28			6. Election Campaign Financing		\$5.00 May Be
24	Country 25	Zip	Country	,	Trust Fund Contribution 8. This corporation has liability to	_	Added to Ease
	9. Name and Address of Cur	29 rrent Registered Agent	30] TOTION STATULES L.1 Ye	es IINo	
)CCCDIC			81	Name	10. Name and Address of New	Registered Ag	ent
220 S. F	JEFFRIES, DAVID M 220 S. FRANKLIN STREET		82	Street Add	dress (P.O. Box Number is Not Accepta		
TAMPA	FL 33602		83		wess (Fig. 50x Number is Not Accepta	ible)	
11. Pursuant	to the provisions of Sastian son as		84	City			5 Zip Code
		00					
or register familiar wi	red agent, or both, in the State of Flo th, and accept the obligations of Sc	002 and 607.1508, Florida Statut orida. Such change was authoriz	es, the above-n	amed corpor	ration submits this statement for the pure	rpose of changing	na its registered office
SIGNATURE			es, the above-n ed by the corpo	amed corporation's boa	ration submits this statement for the purific difference of directors. I hereby accept the app	rpose of changing pointment as reg	ng its registered office istered agent. I am
SIGNATURE	Signature, typed or printed name of registered ag-	pool and tife if applicable win					ng its registered office stered agent. I am
SIGNATURE .	Styristics typed or preted name of registered ay OFFICERS A	port and the mary-locable (NC ND DIRECTORS	TE Registered Agent		d when renstating)	FIAT:	
SIGNATURE 12. TILLE NAME	Styreture typed or prehatmence of registered as OFFICERS A P GREEN, JOSEPH J.	pool and tife if applicable win	13.			FIAT:	ECTORS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS	Styristure typed or prehist name of registered as OFFICERS A P GREEN, JOSEPH J. 5688 W. CRENSHAW	port and the mary-locable (NC ND DIRECTORS	TE Registered Agent	signature require	d when renstating)	DATE ICERS AND DIR	ECTORS IN 12
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SIGNATURE:

SIGNATURE AND PYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/96 8824 8600 Dayford Prone Prone