

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Mar 05 1997 8:00am  
Secretary of State

DOCUMENT # F96000001604 (5)

1. Corporation Name:  
TERMIMESH USA INC.



Principal Place of Business  
38 WESTCHESTER ROAD  
MALAGA, WESTERN AUSTRALIA

Mailing Address  
38 WESTCHESTER ROAD  
MALAGA, WESTERN AUSTRALIA

3. Date Incorporated or Qualified  
03/29/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Zip Country

28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YADLEY, GREGORY C  
101 E. KENNEDY BLVD., STE 2800  
TAMPA FL 33602

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 the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PCD ☐ DELETE

NAME TOUTOUNTZIS, VASILIOS  
STREET ADDRESS 4 NERIDA PLACE  
CITY-ST-ZIP SORRENTO, WESTERN AUSTRALIA

1.1 TITLE ☐ Change ☐ Addition

TITLE V ☐ DELETE

NAME TOUTOUNTZIS, AGAPI  
STREET ADDRESS 4 NERIDA PLACE  
CITY-ST-ZIP SORRENTO, WESTERN AUSTRALIA

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE PD ☐ DELETE

NAME GLOSSOP, LAURENCE G  
STREET ADDRESS 1 CUMNOCK PLACE  
CITY-ST-ZIP DUNCRAIG, WESTERN AUSTRALIA

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE STD ☐ DELETE

NAME GARDNER, MARY E  
STREET ADDRESS 1 CUMNOCK PLACE  
CITY-ST-ZIP DUNCRAIG, WESTERN AUSTRALIA

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE AS ☐ DELETE

NAME YADLEY, GREGORY C  
STREET ADDRESS 101 E KENNEDY BLVD., STE 2800  
CITY-ST-ZIP TAMPA FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19 FEB 1997 +61 9 249 3868

Date

Daytime Phone #

CR2E034 (9/96)