

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F97000002101**

1. Entity Name

TREND WESTERN TECHNICAL CORPORATION ✓**FILED**
Jul 18, 2000 8:00 am
Secretary of State

07-18-2000 90010 036 ***550.00

Principal Place of Business

**4128 WEST COMMONWEALTH AVENUE
FULLERTON CA 91833**

Mailing Address

**4128 WEST COMMONWEALTH AVENUE
FULLERTON CA 91833**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-1785731

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****TICE, FRED
642 HACKNEY
MELBOURNE FL 32901****7. Name and Address of New Registered Agent**

Name

John H. Wyatt

Street Address (P.O. Box Number is Not Acceptable)

6349 Oak Knoll Rd.

City

Panama City**FL**

Zip Code

32404

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

13 JUL 20009. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE ☐ Delete
NAME **PCTD**
STREET ADDRESS **JARVIS, ROBERT J**
CITY-ST-ZIP **19716 GOLDEN BOUGH DRIVE**
COVINA CATITLE ☐ Delete
NAME **VSD**
STREET ADDRESS **JARVIS, MICHAEL R**
CITY-ST-ZIP **101 VALLEY DRIVE**
MANHATTAN BEACH CATITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Jarvis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/10/00

Daytime Phone #

714-528-3078

CR2E034 (5/00)