## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #** 

1. Corporation Name

G67585

(1)

TRIAM CORPORATION

11117 1117							
Principal Place of Business Mailing Address						MINI   MINI	IFBIS WIBII BIB <mark>II IBBI</mark>
8903 GLADES RD. SUITE L-9242 BOCA RATON FL 33434		8903 GLADES RD. Suite L-9242 Boca Raton Fl 33434		Date Incorporated or Qualified	3a. Date of Las	st Report	
					11/03/1983	08/25/	,
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	, ,,,,,,	Applied For
21 20423				5 0	59-2339955		Not Applicable
	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 7 -	.75 Additional se Required
City & State	)	City & State			6. Election Campaign Financing	\$!	5.00 May Be
23 BOCA				-	Trust Fund Contribution	1 7	dded to Fees
Zip	Country				8. This corporation has liability for		ers 199.032,
24 3349						<b>⊠</b> No	
	9. Name and Address of Currer	nt Registered Agent		T-11	10. Name and Address of New F	legistered Agent	
			8	Name			
FLOYD H. ZINK, JR. 9943 MAJORCA PLACE				Street Ac	dress (P.O. Box Number is Not Acceptab	ole)	
	ATON FL 33434		8:	3			
			84	City		FI 85	Zip Code
or register familiar wit SIGNATURE	ed agent, or both, in the State of Flori th, and accept the obligations of, Sect Signature, typed or printed name of registered agent	ida. Such change was authorized l tion 607,0505, Florida Statutes.	by the cor	poration's bo	poration submits this statement for the purporation submits this statement for the purporation of directors. I hereby accept the appured when recessing	ointment as registe	ered agent. I am
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		CTORS IN 12
TITLE	PS	DELETE 1.1			<u>T</u>	☐ Chai	CTORS IN 12
NAME	ZINK, FLOYD H.,JR.	FLOYD H.,JR. 128		:			
STREET ADDRESS			1.3 STREE	T ADDRESS			Į į
C+1Y-S1-ZIP			1.4 CITY	ST-ZIP			
TITLE	D	DELETE 2 1		· [		Chai	nge: 🗌 Addition 🛚 🤇
NAME	O'NEILL, HUGH		2.2 NAME				
STREET ADDRESS	3550 LANDER RD.			et address			
CITY-ST-ZIP	CLEVELAND OH	€ below	2.4 CHTY				nn. 🗖 Addition
TITLE		☐ DELETE	3 1 TiTLI			☐ Cha	nge: 🔲 Addition
NAME			3 2 NAMI				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4 CITY -			☐ Cha	nge Addition
NAME			4 1 INL			ال ال	- I radición
				ET ADDRESS			
STREET ADDRESS	1						
CITY+\$1-ZIP		☐ DELETE	4.4 CITY 5. 1 TITU			☐ Cha	nge
NAME			5.2 NAMI				· _ · · ·
STREET ADDRESS				ET ADDRESS			

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 119.07(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 cath; 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 THE ONE MADE OF SIGNING OFFICER OR DIRECTOR

Daylow Prove #

Daylow Prove #

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6. 1 TITLE

6.2 NAME

CITY-ST-ZIP

1:11.6

NAME STREET ADDRESS

DELETE

☐ Change ☐ Addition