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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	1997	/ DIVIDION OF	OOM ONATIO	J110			
DOCUMENT # H54369 (4) TRYDAN CORPORATION					T HENTEN BURG ORMA DIABO MINA BUHA NEW BURGO ANDO ANDO ANDO BURGO		
Principal Place of Business 1369 N. KILLIAN DR. LAKE PARK FL 33403 US		Mailing Address P.O. BOX 14804 NORTH PALM BEACH FL 33408-0804 US					
					3. Date incorporated or Qualified 04/30/1985	3a. Date of Last 6 04/12/1996	Report
2. Principal Pl	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0033543		pplied For lot Applicable
Suite, Apt #, etc. Suite, Ap			Apt #, etc.		5. Certificate of Status Desired	\$8.75	Additional
City & State	0	Crtv & State	City & State		6. Election Campaign Financing	Fee R	lequired May Be
23		28		·	Trust Fund Contribution		to Fees
Ζφ <b>24</b>	Country Zip Country 29 30		Country 30	<i>(</i>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \( \bigcap \) Yes \( \bigcap \) No		
	9. Name and Address of Current			Г.	10. Name and Address of New Re	gistered Agent	
	BY, KENNETH B. 1 URANUS TERRACE		81				
	E PARK FL 33403		82	Street Addre	at Address (P.O. Box Number is Not Acceptable)		
			63	· · · · · · · · · · · · · · · · · · ·			
			84	City		FL 65 Zip	Code
	to the provisions of Sections 607.0502 egistered agent, or both, in the State or rn familiar with, and accept the obligat	and 607.1508, Florida Statu f Florida, Such change was ions of, Section 607.0505, F	ites, the above authorized by lorida Statute	e-named corp y the corporati s.	oration submits this statement for the pion's board of directors. I hereby acception's	urpose of changing of the appointment as	its registered s registered
SIGNATURE	Signature, typed or punted name of registered agent	and title if applicable (NO	TE: Registered Age	ent signature require	ed when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12 Addition
TITLE NAME	KIRBY, KATHRYN P.	1.7 N				L) Change	
STREET ADDRESS	8631 URANUS TERRACE			ADDRESS			Ì
CITY - S1 - ZIP	LAKE PARK FL DP			ST-ZIP			- Addition
TITLE NAME	MINDY MANAGER IN		2.1 TITLE 2.2 NAME			Change	Addition
STREET ADORESS	8631 URANUS TERRACE		2.3 STREET	ADDRESS			
CITY-ST-ZIF			2. 4 CITY -	ST-ZIP			
TITLE NAME		☐ DELETE	3 1 TITLE 3.2 NAME			Change	L Addition
STREET ADDRESS				ADDRESS		: 4	
CHY-ST-7IP			3.4. CITY-	ST-ZIP			
THLE NAME		DELETE	4.1 TITLE 4.2 NAME			L_J Change	Addition
STREET ADDRESS				ADORESS			
C(1Y - S1 - 2)P			4.4 CITY - 5	1			
TITLE		DELETE	5.1 TITLE.			Change	Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET	ADDRESS	•		
CHTY+ST-7IP			5.4 CITY-5				
THEF		DELETE	6.1 TITLE			Change	Addition
NAME STREET ADORESS			6.2 NAME	T ADDRESS			
CITY-ST-ZIP			6.4 CITY - S				
14. Loo heret	on indicated on this annual report or su	polemental annual report is	lify for the exe	emption stated	d in Section 119.07(3)(i), Florida Statute my signature shall have the same lega	il effect as if made ur	nder oath: that I
Lam an o	flicer or director of the corporation or t in Block 12 or Block 13 if charged, or	he receiver or trustee empo	wered to exec	cute this repor	t as required by Chapter 607, Florida S	tatutes; and that my	name

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-888-9100 Daytine Prone #

**FILED** 

May 09 1997 8:00am

Secretary of State