## **FILED** FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 Apr 10 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 (3)DOCUMENT # **J06070** TRIM TECH OF FLORIDA INC. Principal Piace of Business Mailing Address 2481 SPRUCE VIEW WAY C/O LOLA ROBITAILLE 2481 SPRUCE VIEW WAY PT ORANGE FL 32124-3748 PT ORANGE FL 32124 3. Date Incorporated or Qualified 3a. Date of Last Report 03/18/1986 04/30/1996 2. Prencipal Place of Business 4. FEI Number 2a, Mailing Address Applied For 59-2690089 26 21 Not Applicable State, Apr. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROBITAILLE, LOLA 2481 SPRUCE VIEW WAY 82 Street Address (P.O. Box Number is Not Acceptable) **PORT ORANGE FL 32124** 83 84 City Zip Code 85 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 tansfer with, and accept the obligations of, Section 607.0505, Florida Statutes. about by ratios or and nation of registered agent and title it approable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6)DELETE Channe 1.1 TITLE THE ROBITAILLE, HARVEY 1.2 NAME NAME 2481 SPRUCE VIEW WAY 1.3 STREET ADDRESS STEEL ACORESS PORT ORANGE FL 1.4 CITY - S1 - ZIP CHY ST 7d nut DELETE 21 TITLE Change Addition NAME 22 NAME \$18EEL ADDRESS 2.3 STREET ADDRESS CHY ST-70 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAMI 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY - ST-ZIP City SE-Zin DELETE Addition 4.1 TITLE DI F 4.2 NAME NAV SUBLEM ACCOSS 58 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CHY ST ZIF Addition DELETE 5.1 TITLE Change THE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS C(TY - ST - 71f) 5.4 CITY - ST - ZIP DELETE Change Addition 1011 6.1 TITLE 6.2 NAME

SIGNATURE:

STREET ADDRESS

011Y-51 7:0

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 information indicated on this annual report or supplemental annual report is true and accurate and that my signature. Fam an officer or director of the corporation or the receiver or trustee empowered to execute this report as require appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

iles. I further certify that the agal effect as if made under oath; that da Statutes; and that my name

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