SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 22 AM 8:49

DOCUMENT # **K98005** **(7)**

1. Corporation Name
TRI POWER INVESTMENTS, INC.

Principal Place of Business	Mailing Address
% JOSEPH ALOIA 829 ANCHORAGE DR N. PALM BEACH FL 33408	% JOSEPH ALOIA 829 ANCHORAGE DR N. PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/26/1989
3a. Date of Last Report: 05/10/1994

2. Principal Place of Business
21: 1726 AVE 'L'
Suite, Apt. #, etc. 22: ~~RIVIERA BEACH~~ N/A ~~FL~~
City & State 23: ~~33404~~ Riviera Bch Fl.
Zip 24: 33404 County 25: PALM BEACH

2a. Mailing Address
26: 1726 AVE 'L'
Suite, Apt. #, etc. 27:
City & State 28: RIVIERA BEACH FL.
Zip 29: 33404 Country 30: Palm Beach

4. FEI Number: 65-0127843 ☐ Applied For ☐ Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

ALOIA, JOSEPH
829 ANCHORAGE DR
N. PALM BEACH FL 33408

10. Name and Address of New Registered Agent

81 Name: CHRISTOPHER J. ALOIA
82 Street Address (P.O. Box Number is Not Acceptable): 1726 AVE 'L'
83:
84 City: RIVIERA BEACH FL 85 Zip Code: 33404

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: Christ J. Aloia CHRISTOPHER J. ALOIA 6/13/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95		
TITLE	D	11 TITLE	P S	☐ Change ☒ Addition
NAME	ALOIA, JOSEPH	12 NAME	CHRISTOPHER J. ALOIA	
STREET ADDRESS	829 ANCHORAGE DR	13 STREET ADDRESS	1726 AVE 'L'	
CITY-ST-ZIP	N. PALM BEACH FL	14 CITY-ST-ZIP	RIVIERA Beach Fl 33404	
TITLE		21 TITLE	V	☐ Change ☒ Addition
NAME		22 NAME	Joseph R. ALOIA	
STREET ADDRESS		23 STREET ADDRESS		
CITY-ST-ZIP		24 CITY-ST-ZIP	West Palm Beach Fl 33438	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

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)(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: Christ J. Aloia 6/13/95 407-844-6201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0083166 CP