

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P19470 (4)

1. Corporation Name

TRITON OIL & GAS CORP.



Principal Place of Business

Mailing Address

% CORPORATION TRUST COMPANY
1209 ORANGE STREET
WILMINGTON DE 19801

% CORPORATION TRUST COMPANY
1209 ORANGE STREET
WILMINGTON DE 19801

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

25

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/02/1988

3a. Date of Last Report

03/21/1995

4. FEI Number

84-0624727

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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent, if not applicable. (NOTE: Registered Agent signature required when reappointing.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME VPD
RUGG, PETER
STREET ADDRESS 6688 N CENTRAL EXP 1400
CITY-STATE-ZIP DALLAS TX

1.1 TITLE Sr. Vice President/Director ☒ Change ☐ Addition

1.2 NAME Rugg, Peter
1.3 STREET ADDRESS 6688 N. Central Exp., Ste 1400
1.4 CITY-STATE-ZIP Dallas, TX 75206

TITLE ☐ DELETE

NAME T
PRESTON, RICHARD D
STREET ADDRESS 6688 N CENTRAL EXP 1400
CITY-STATE-ZIP DALLAS TX

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME DP
FINCK, THOMAS G
STREET ADDRESS 6688 N CENTRAL EXP 1400
CITY-STATE-ZIP DALLAS TX

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME SD
HOLLAND, ROBERT B III
STREET ADDRESS 6688 N CENTRAL EXP 1400
CITY-STATE-ZIP DALLAS TX

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

3.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

3.3 NAME ☐ Change ☐ Addition

3.4 CITY-STATE-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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 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, on this attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD D. PRESTON

2/26/96

214-691-5200

Daytime Phone #

CR2E034 (12/95)