

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P31134** (0)  
1. Corporation Name  
**TRIDENT MOTOR GROUP, INC.**



Principal Place of Business

**1108 SOLANA AVE  
WINTER PARK FL 32789  
US**

Mailing Address

**913 N PENNSYLVANIA AVE  
WINTER PARK FL 32789  
US**

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip Country

**24** **25**

2a. Mailing Address

**26** **913 N. Pennsylvania Ave.**

Suite, Apt. #, etc.

**27**

City & State

**28** **Winter Park, FL**

Zip

**29** **32789**

Country

**30** **USA**

3. Date Incorporated or Qualified  
**09/11/1990**

3a. Date of Last Report  
**06/15/1995**

4. FEI Number  
**59-2478158**

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

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)  
**1108 Solana Avenue**

**83**

**84** City **Winter Park**

**FL**

**85** Zip Code  
**32789**

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 of person submitting this report (if not the registered agent, then the president or secretary of the corporation)

NOTE: Registered Agent Signature required when registering.

**4/17/96**

12. OFFICERS AND DIRECTORS

☐ DELETE

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
**PSCD**  
**HAMLET, JOHN E., JR.**  
**SHELKOSKOE SHOSSE 2**  
**MOSCOW RU**

☐ DELETE

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
**VD**  
**NIKITINE, VADIM A.**  
**SHELKOSKOE SHOSSE 2**  
**MOSCOW, USSR**

☐ DELETE

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

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**STREET ADDRESS**  
**CITY - ST - ZIP**

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**John E. Hamlet Jr**

**4/17/96**

**(407) 629-2100**

CR2E034 (12/95)