

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P39128** (4)

1. Corporation Name:

TRIDENT TECHNOLOGIES, INC.



Principal Place of Business

Mailing Address

**913 N. PENNSYLVANIA AVE
SUITE 206
WINTER PARK FL 32789
US**

**913 N. PENNSYLVANIA AVE
SUITE 206
WINTER PARK FL 32789
US**

3. Date Incorporated or Qualified
06/05/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 **913 N. Pennsylvania Ave.**

26 **913 N. Pennsylvania Ave.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Winter Park, FL**

28 **Winter Park**

24 **32789** 25 **USA**

29 **32789** 30 **USA**

4. FEI Number

93-0918848

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

10. Name and Address of New Registered Agent

**HAMLET, JOHN E., JR.
913 N PENNSYLVANIA AVE
WINTER PARK FL 32789**

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 of Registered Agent (if different from above)

Signature of Registered Agent (if different from above)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **DCP
HAMLET, JOHN E., JR.**
STREET ADDRESS **13 LENINSKY PROSPERT
MOSCOW RU**

TITLE ☐ DELETE

NAME **DVC
NIKITINE, VADIM A.**
STREET ADDRESS **31 LENINSKY PROSPERT
MOSCOW RU**

TITLE ☐ DELETE

NAME **DS
NIKITINE, ASHLEY WORTH**
STREET ADDRESS **913 N PENNSYLVANIA AVE
WINTER PARK FL**

TITLE ☐ DELETE

NAME **D
NIKITINE, VADIM A.**
STREET ADDRESS **DIG STEEL 9TH FLOOR-
MOSCOW**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY-STATE-ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY-STATE-ZIP

☒ Change

☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John E. Hamlet, Jr.

1/18/96

(407) 629-2100

Daytime Phone #

CR2E034 (12/95)