FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Secretary of State

Jul 01 1997 8:00am

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000073791 (4)

TRIDENT EQUITIES, INC.

Principal Place of Business Mailing Address					4 JOOLING I TID FATON TITIF BRINK BOKIN ROLLIN (BOND LIITI TOOKIR FALA) TIDI FOOT		
PENTHOUSE T 3101 8 OCEAN HIGHLAND BO US	N BLVD 104	C/O WEIGHT WATCHRS 251 US ROUTE 1 FALMOUTH ME 04105-13 US	251 US ROUTE 1 FALMOUTH ME 04105-1322		Date Incorporated or Qualified 38. Date of Last Report		
		····			10/18/1993	03/20/1996	
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt.	# etc	Suite, Apt. #, etc.			65-0455006	Not Applicab	
22		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Z _I p	Count	гу	This corporation has fiability for Florida Statutes	intangible tax under s. 199.032,	
L=-v1	9, Name and Address of Currer		190		10. Name and Address of New R		
PAU	JL W. LUDWICK		8	1 Name			
PEN	ITHOUSE TOWERS		8:	2 Street Add	dress (P.O. Box Number is Not Accepta	(ble)	
	1 S OCEAN BLVD, APT 104 HLAND BEACH FL 33487	•	8:	3		·	
nio	HLAND DEACH FL 33407				····		
			8	1 City		FL 85 Zip Code	
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Statu of Florida, Such change was	ites, the abo	ve-named cor	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered	
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statute	es		pri tro appointment as registeres	
SIGNATURE	Signature, typod or printed name of registered age	ent and title if applicable (NO	JE: Registered A	ner signature regu	uired when reinstating)	DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		
TITLE	Р	☐ DELETE	1.1 TITLE	-		Change Additio	
NAME	PAUL W LUDWICK		1.2 NAME				
STREET ADDRESS	C/O WEIGHT WATCHERS, 251	I US RT 1	1.3 STREE	1 ADDRESS			
CITY-ST-ZIP TITLE	FALMOUTH ME	DELETE	14 CITY -	ST-ZIP		[] (Alexander [] Alexander Alexand	
NAME	WALTER & LUDWICK	ריים מנדנונ	21 TITLE	ľ		Change Additio	
STREET ADDRESS	PENTHOUSE TOWERS 3101 S	COCEAN BLVD 104	22 NAME	ET ADDRESS			
CITY-ST-ZIP	HIGHLAND BEACH FL		2 4 City				
TITLE	VP .	DELETE	31 11111	J. 17		Change Additio	
NAME	LUDWICK, WALTER G.		3.2 NAME				
STREET ADDRESS	398 W CAMINO GARDENS BL	VD PLAZA V STE 109	3.3 \$1REE	1 ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		3 4. CITY	- \$1 - ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Additio	
NAME			4. 2 NAM	[
STREET ADDRESS				LADORESS			
CITY-ST-ZIP		DELETE	4.4 CITY	ST-ZII'	·····		
TITLE		€ DETETE	5.1 TITLE			Change Additio	
NAME PIDEET ADDRESS			5.2 NAME	i			
STREET ADDRESS				1 ADDRESS			
CITY-SI-ZIP TITLE		DELETE	5.4 GITY - 6.1 TITLE	51-ZIP		☐ Change ☐ Additio	
NAME		المان المان	6.2 NAME			L Change L Additio	
STREET ADDRESS				I ADDRESS			
CITY-ST-ZIP			6.4 CHY-				

14. I do hereby certify that the information supplied with this filing 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

K 12-197