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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90140 033 ***150.00

DOCUMENT # P9400007037

1. Corporation Name

TRION VENTURES VII, INC.

									. []			
Principal Place of Business Mailing Address							i ignited the rath state and state and	•••				
5310 NW 33RD AVE.			- 5310 NW 33RD AVE.									
SUITE 219			SUITE 219				DO NOT WRITE IN THIS SPACE					
FT. LAUDERDLAE FL 33309 FT. LAUDERDLAE FL 3330							3. Date Incorporated or Qualifed					
							01/28/1994					
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		Т	App	lied For	
¬ ·			26				65-0586162					
21 Suite Apt #, etc.			Suite, Apt. #, etc.					!	\$8.7		lditional	
22			27				5. Certificate of Status Desired Fee Required					
City & State			City & State				6. Election Campaign Financing		\$5.	00 N	lay Be	
23			28				Trust Fund Contribution		Add	ded to	Fees	
Zip	Country	T	Zip	Count	Ŋ		8. This corporation owes the current year	ntang	jible			
24	25	29	30				Personal Property Tax. ☐ Yes ☐ No				□No	
	9. Name and Address of Current	Regis					10. Name and Address of New Registere	d Age	ent			
				8	1	Name						
BARBER, KENNETH T						Street Addre	dress (P.O. Box Number is Not Acceptable)					
5310 NW 33RD. AVE.			· · · · · · · · · · · · · · · · · · ·									
	E 219			8	3						}	
FT. L	AUDERDALE FL 33309			8	↲	City			85	Zip Co	ode	
					-	•	F	LI		•	ļ	
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, toffice or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida 						-named corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the app	of cha ointm	anging nent a	g its regi	∍gistered stered	
SIGNATURE												
	Signature, typed or printed name of registered agent		 		jent	t signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND (DIRE	CTOE	S IN 12	
12.	OFFICERS AND	DIRE	DELETE	13.	_		ADDITIONS/CHANGES TO OFFICERS		Cha		Addition	
TITLE	S DADDED LEGIE W		□ pertir					_				
NAME	BARBER, LESLIE W			1.2 NAMI								
STREET ADDRESS 5310 NW 33RD AVE. STE. 219						ADDRESS					Ì	
CITY-ST-ZIP	FT. LAUDERDALE FL 33309		☐ DELETE	1.4 CITY-		-ZIP			Cha	nge	Addition	
TITLE .	PTD		C) DELETE	2.1 T/TLE				_				
NAME (BARBER, KENNETH T	40		2.2 NAMI								
STREET ADDRESS	5310 NW 33RD AVENUE STE 2	19				ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE FL 33309		☐ DELETE	2. 4 CITY 3.1 TITLE		T-ZIP] Cha	nige	Addition	
TITLE	VP		□ occeie							.		
NAME	BRANSCOMB, RICHARD	40		3.2 NAMI								
STREET ADDRESS	5310 NW 33RD AVENUE STE 2	19			-	ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE FL 33309		☐ DELETE	3.4. CITY 4.1 TITLE		T-ZIP			7 Cha	nae	Addition	
TITLE	VP		· DEFEIG			ļ		_				
NAME	BAKER, PHYLLIS M	40		4. 2 NAM								
STREET ADDRESS	5310 NW 33RD AVENUE STE 2	19				ADORESS					Ì	
CITY+ST-ZIP	FT LAUDERDALE FL 33309		☐ DELETE	4.4 CITY		i-ZIP		—г	Cha	inge	Addition	
TITLE			□ pere e	5.1 TITLE 5.2 NAMI						- 5-		
NAME						TADORESS						
STREET ADDRESS											1	
CITY-ST-ZIP			☐ DELETE	5.4 CITY 6.1 TITLE		-ZIF			Cha	noe	Addition	
TITLE			□ DELETE	6.1 MAM					↓	gc		
NAME						FARRORECC					Ì	
STREET ADDRESS	Secretary to the second			0.3 S I R	C 1.	FADORESS						

14. I hereby certify that the information supplied with this filing deta 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 firme 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP