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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT #+ **P96000018577**

1. Corporation Name

TRI -AMERICA, INC.

Principal Place of Business
920 US #1 STE G
SEBASTIAN, FL 32958

Mailing Address

3. Date Incorporated or Qualified: **2/26/96**
3a. Date of Last Report:

2. Principal Place of Business
21 **ONE AIR TERMINAL PKWY**
22 Suite, Apt. #, etc.
23 City & State: **MELB, FL 32901**
24 Zip
25 Country

2a. Mailing Address
26 **SAME**
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

4. FEI Number: **65-0660154** ☐ 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

JOHN ESPOSITO
920 HWY US #1 STE G
SEBASTIAN, FL 32958

10. Name and Address of New Registered Agent

81 Name: **JOHN ESPOSITO**
82 Street Address (P.O. Box Number is Not Acceptable): **ONE AIR TERMINAL PKWY**
83
84 City: **MELB, FL** **FL** 85 Zip: **32901**

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: X John Esposito — John Esposito — 3/28/97
(Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PRES	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	ROBERT KINNEY		12 NAME		
STREET ADDRESS	301 OAK ST		13 STREET ADDRESS		
CITY-ST-ZIP	MELB BCH, FL 32903		14 CITY-ST-ZIP		
TITLE	SEC/TREAS	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	JOHN ESPOSITO		22 NAME		
STREET ADDRESS	401 LAKE DR		23 STREET ADDRESS		
CITY-ST-ZIP	SEBASTIAN, FL 32958		24 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS	300002132853 -04/03/97--01075--015 ***165.00	
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

CR2E034 (9/96)

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.

SIGNATURE: X John Esposito — John Esposito — TEXAS 3/28/97 — 407-725-5771

4/3/97