

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P 96000060502

1. Entity Name

TRINOVA INC

FILED

01 OCT 15 PM 5:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

9660 US HWY 301 S

SEE BELOW

RIVERVIEW FL 33569

2. Principal Place of Business

3. Mailing Address

9660 US 301 S

12250 S.W. 80TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
RIVERVIEW, FL

City & State
MIAMI, FL

4. FEI Number

65-0694149

Applied For

Not Applicable

Zip
33569

Country
USA

Zip
33183

Country
USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MICHAEL ROEDY CPA

205 N. PARSONS AVE

BRANDON FL 33510

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$350.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME MAYRA ROSE
STREET ADDRESS 4301 S.W. 4TH ST
CITY-ST-ZIP MIAMI FL 33134

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
500004653315
-10/25/01--01056--007
****150.00 ****150.00

☐ Change

☐ Addition

TITLE D
NAME DENNIS CHOW
STREET ADDRESS 12250 S.W. 80TH ST
CITY-ST-ZIP MIAMI FL 33183

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME R. M. RICHARDSON
STREET ADDRESS 15 S. ESPLANADE 2R #C
CITY-ST-ZIP MIAMI SPRINGS FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert M Richardson

9/28/01 813-677-3284

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

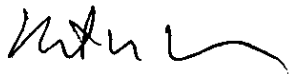
Signature Printed #

CR25034 (11/00)

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To whom it may concern,

Please waive the late filing penalty for our corporation: the company's mailing address changed last year as a result of a reorganization and we never received this report. We have just become aware that the report had not been timely filed.



R. M. Richardson
V.P. - Trinova Inc

09/28/01