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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 12 1997 8:00am

Secretary of State

96/6)

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000071091 (8)

TRIDENT MARINE TECHNOLOGIES, INC. (USA)

Principal Place of Business 21330 MILLBROOK CT 21330 MILLBROOK CT BOCA RATON FL 33498-1916 **BOCA RATON FL 33498-1916** 3a. Date of Last Report 3. Date Incorporated or Qualified 08/23/1996 Applied For 2. Principal Place of Business 2a. Mailing Address FEI Number 5 · O 7 / RNO 8 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional X Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country Zip Country Źφ This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name NILL, ERIC D 21330 MILLBROOK CT Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33498-1916** 83 84 City 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, typed or printed name of registered agent and titre if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition PCEO DELETE 1.1 TITLE Change TITLE **NILL. BRUCE T** 1.2 NAME NAME 21330 MILLBROOK CT 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33498-1916** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE COWSERT, GREGORY L 2.2 NAME NAME 21330 MILLBROOK CT 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33498-1916** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NILL BRUCE T 3.2 NAME NAME 21330 MILLBROOK CT 3.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33498-1916** 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition THILE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 61 TITLE THUE NAME 62 NAME

6 3 STREET ADDRESS

Dale

Daytime Phone #

6.4 CITY-ST-ZIP 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