2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED DOCUMENT # **P96000071091** May 15, 2000 8:00 am Secretary of State TRIDENT MARINE TECHNOLOGIES, INC. (USA) 05-15-2000 90235 027 ***150.00 Mailing Address Principal Place of Business 21330 MILLBROOK CT 21330 MILLBROOK CT BOCA RATON FL 33498-1916 BOCA RATON FL 33498-1916 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0718008 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NILL: ERIC D Street Address (P.O. Box Number is Not Acceptable) 21330 MILLBROOK CT BOCA RATON FL 33498-1916 Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition PCE0 ☐ Delete TITLE TITLE NILL, BRUCE T NAME STREET ADDRESS STREET ADDRESS 21330 MILLBROOK CT CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33498-1916 ☐ Change ☐ Addition TITLE ☐ Delete TITLE COWSERT, GREGORY L NAME NAME STREET ADDRESS 21330 MILLBROOK CT STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP BOCA RATON FL 33498-1916 ☐ Change Addition ☐ Delete TITLE TITLE NILL, BRUCE T NAME NAME 21330 MILLBROOK CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33498-1916** Delete ☐ Addition TITI F TITLE PEBERDY, RON NAME NAME OLD SCH, STAWELL MR BRIDGEWATER STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SOMERSET ENGLAND TA-79AE ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE T . 5 . Maria de NAME The transfer of the state STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I 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 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