SECOND AMOUNT DUE	NOTICE: CORPORATION WILL B ON OR BEFORE 8/7/96: \$225 (IF DIS	E DISSOLVED ON OR A SOLVED, MINIMUM AMOI	AFTER AUGU JNT DUE TO R	ST 7, 1996. EINSTATE: \$375.)	1165.00	
PROFIT FLORIDA DEPARTMENT OF S						
CORPORATION Sandra B. Mo ANNUAL REPORT Socretary of				fortham of States		
1996 997 DIVISION OF CORPORAT					SECRETARY OF STATE DIVISION OF CORPORATIONS	
DOCUMENT # S13092 (9)					97 JUL 30 PM 1:52	
TRIDENT HOLDING CO.					J 1 00 L 00 1 1	
INDER	II HOLDING CO.					
Principal Place of Business Mailing Address					10811010 101 11300 11111 11110 11110 11110 11110 11110 1111	IX OTOTA OLDAN OLDAN ƏTDIR OTORA OLDAN RODA
% SCOTT AURICH 1339 ORANGE AVE SUITE 8 % SCOTT AURICH 1339 ORANGE AVE SUITE 8						
CORONADO CA 92118 CORONADO CA 92118					3. Date Incorporated or Qualified	3a. Date of Last Report
Principal Place of Business 2a. Mailing Address				· ····································	11/08/1990 4. FEI Number	03/14/1995 Applied For
21		26	26		65-0249866	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, 6	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip	30	ountry	This corporation has liability for Florida Statutes	
24	9. Name and Address of Curre	29 nt Registered Agent	[30]		10. Name and Address of New Re	
KAPLAN, ERIC 81 Name						
1110 BRICKELL AVE 7TH FLOOR 82 Street Address (P.O. Box Number is Not Acceptable)						ole)
MIAMI-FL 33131						
	v			84 City		FL 85 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 as	pent and little if applicable.		ered Agent signature roqu		DATE
12. TITLE	# President	DELI	13 TE 1.1	TITLE	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADDRESS	AURICH, SCOTT 1339 ORANGE AVE., #8			NAME STREET ADDRESS	1000022	565419 8
CITY-ST-ZIP	CORONADO CA 92115			I CITY-ST-ZIP	-08/04/9 ****169	565 41 —9 8 37-01106-009 8 5.00 14*****165,000
TITLE NAME	DELETE			TITLE	444WIQ.	Change Addition O
STREET ADDRESS	4			STREET ADDRESS		
CITY-ST-ZIP TITLE	ZIP DELETE			4 CITY-ST-ZIP	.	Change Addition
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STREET ADDRESS CITY-ST-ZIP				I STREET ADDRESS I. CITY-ST-ZIP		
TITLE		DEL	TE 4.1	TITLE		Change Addition
STREET ADDRESS				2 NAME 3 Street Address		
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NAME .	DELETE			TITLE NAME		Change Addition
STREET ADDRESS	•			STHEET ADDRESS		
CITY-ST-ZIP TITLE	DELETE			I CITY - ST - ZIP		Change Addition
NAME	1 -			NAME		
STREET ADDRESS CITY-ST-ZIP			6.4	I STREET ADDRESS I CITY - ST - ZIP	dec 8	
14 I do herel	by certify that the information subplicingly that the information indicated of	ed with this filing is volunt n this annual report or su	arily furnished	and does not qua	lify for the exemption stated in Section and accurate and that my signature sha	19.07(3)(k), Florida Statutes. I Il have the same legal effect as if
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 617, Florida Statutes; and that my name appears in Block 12 or Block 12 or Block 12 or an attachment with an address.						
SIGNATURE: SIGNATURE: SIGNATURE AND TAKE OF SIGNING OFFICER OR DIRECTOR Date Dat						