

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006878

FILED
Apr 22, 2005
Secretary of State

Entity Name: TRANS AMERICAN AIRLINES, S.A.

Current Principal Place of Business:

777 BRICKELL AVE SUITE 1114
MIAMI, FL 33131

New Principal Place of Business:

8725 N.W. 18 TERRACE
SUITE 402
MIAMI, FL 33172 US

Current Mailing Address:

777 BRICKELL AVE SUITE 1114
MIAMI, FL 33131

New Mailing Address:

8725 N.W. 18 TERRACE
SUITE 402
MIAMI, FL 33172 US

FEI Number: 65-1058186

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, WILLIAM
777 BRICKELL AVE SUITE 1114
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

BROWN, WILLIAM
777 BRICKELL AVE
SUITE 1114
MIAMI, FL 33131 US

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: WILLIAM BROWN

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RATTI, DANIEL
Address: AVE. COMANDANTE ESPINAR, 331 MIRAFLORES
City-St-Zip: LIMA, PERU,

Title: S () Delete
Name: FERRRADAS PLATAS, JULIO
Address: AVE. COMANDANTE ESPINAR, 331 MIRAFLORES
City-St-Zip: LIMA, PERU,

Title: D () Delete
Name: ORTIZ-MESSEGUER, LUIZ
Address: AVE. COMANDANTE ESPINAR, 331 MIRAFLORES
City-St-Zip: LIMA, PERU,

Title: D () Delete
Name: ROJAS, JOSE G
Address: AVE. COMANDANTE ESPINAR, 331 MIRAFLORES
City-St-Zip: LIMA, PERU,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL RATTI

P

04/22/2005

Electronic Signature of Signing Officer or Director

Date