2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 26, 2005 08:00 AM Secretary of State

8. Name and Address of Current Registered Agent POMA, ERNESTO 2121 SW 3RD AVD, 8TH FL TALLAHASSEE, FL 33129 DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the etilipations of registered agent approach to the purpose of changing its registered discorpt registered agent, or both, in the State of Florida. I am familiar with, and accept the etilipations of registered agent. SIGNATURE: Signature band of prince face or adjected agent agent and the applicable (PDTE Pedicered Agent Strate Band of Band Agent Strate Band of Band Agent Strate Band of Band Band Band Band Band Band Band Band	1. Entity Name	MENT # N94000056 PARK PROPERTY OWNER			S	ecreta	ry of State		
DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0747679	% TRANSAL (2121 SW 3RI	CORP. D AVE., 8TH FL	% TRANSAL CORP. 2121 SW 3RD AVE., 8TH FL					1 IN UNION COMO 11 OUT	
DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature band of filter faces or registered agent. Filling Fee is \$61.25 Due by May 1, 2005 10. OFFICERS AND DIRECTORS TITLE DP POMA, ERNESTO STRET ANGRESS 2121 SW 3RD AVE., 8TH FL MIAMI, FL U00000333290 TITLE DS PITA, RODOLFO STRET ANGRESS CITY-ST-2P MIAMI, FL UMAMI, FL TITLE DD NAME STRET ANGRESS STRET ANGRESS CITY-ST-2P MIAMI, FL TITLE NAME STRET ANGRESS CITY-ST-2P TIT	ם		CE	04112005 4. FEI Numbe 65-0747	No Chg-NP r 7679 of Status Desired	CR2E03	Applied For Not Applicable		
SIGNATURE Signature Signature of registered agent and title it applicable (first Engineered Agent dispnature maturitative) DATE	2121 SW 3	NESTO BRD AVD., 8TH FL			NOT W		•		
TILLE DO NOT WRITE IN THIS SPACE TITLE DO NOT WRITE AUDRESS 2121 SW 3RD AVE., 8TH FL U000003332290 TITLE DS NAME PITA, RODOLFO 2121 SW 3RD AVE., 8TH FL U000003332290 TITLE DS NAME PITA, RODOLFO 2121 SW 3RD AVE., 8TH FL U000003332290 TITLE DS NAME STREET AUDRESS CITY-ST-2P MIAMM, FL U0000003332290 TITLE DD NOT WRITE IN THIS SPACE	SIGNATI IRF								
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12. I hereby certify that the information supplied with this filling 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 at equired by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with to an this report or supplemental report is	his filing does not qualify for the excuser and bat my sign.				s. I further certer oath, that I a	tify that the information on an officer or director	