

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL -7 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P18989 (4)
1. Corporation Name
TRANS-RESOURCES, INC.

Principal Place of Business Mailing Address
9 W. 57TH ST STE. 3900 NEW YORK NY 10019 US
9 W 57TH ST STE 3900 NEW YORK NY 10019 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/25/1988** 3a. Date of Last Report **03/30/1994**
4. FEI Number **36-2729497** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
**UNITED CORPORATED SERVICES, INC.
801 NE 107TH ST., STE. 305
N. MIAMI BCH. FL 33182**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	C
NAME	GENGER, ARIE
STREET ADDRESS	9 W. 57TH ST., STE. 3900
CITY-ST-ZIP	NEW YORK NY
TITLE	PD
NAME	HARDY, THOMAS
STREET ADDRESS	9 W. 57TH ST., STE. 3900
CITY-ST-ZIP	NEW YORK NY
TITLE	VT
NAME	YOUNER, LESTER W.
STREET ADDRESS	9 W. 57TH ST., STE. 3900
CITY-ST-ZIP	NEW YORK NY
TITLE	S
NAME	WATROUS, PHILIP J.
STREET ADDRESS	9 W. 57TH ST., STE. 3900
CITY-ST-ZIP	NEW YORK NY
TITLE	VAS
NAME	EICHEN, MARTIN
STREET ADDRESS	9 W. 57TH ST., STE. 3900
CITY-ST-ZIP	NEW YORK NY
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	AS MICHAEL P. ORAVEC
5.3 STREET ADDRESS	9 W 57TH ST., STE 3900
5.4 CITY-ST-ZIP	NEW YORK, NY
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied herein is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(h), Florida Statutes. I further certify that the information indicated on this report (and/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 appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: **M.P. ORAVEC, ASSE SGLY** Date: **6/14/95 (2/12) 888-3014**

CR2E034 (3/95)