

2005 FOR PROFIT CORPORATION REINSTATEMENT

05 122

FILED
05 FEB -4 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
REINSTATEMENT of 05



01192005 REIN-P CR2E098 (6/04)

DOCUMENT # P98000041646

1. Entity Name
TRANCETECH, CORP.



Principal Place of Business
441 ESPANOLA WAY
MIAMI BEACH, FL 33139 US

Mailing Address
441 ESPANOLA WAY
MIAMI BEACH, FL 33139 US

2. Principal Place of Business 1345 NE 17 AVE		3. Mailing Address 1345 NE 17 AVE	
Suite, Apt. #, etc. #4		Suite, Apt. #, etc. #4	
City & State FT. LAUDERDALE, FL		City & State FT. LAUDERDALE, FL.	
Zip 33304	Country usa	Zip 33304	Country usa

4. FEI Number 65-0805591	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

TORRES, SIRA
441 ESPANOLA WAY
MIAMI BEACH, FL 33139

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable)
100046631821

City _____ FL Zip Code _____

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VARON-GARCIA, WILSON D 1302 EUCLID AVE #8 MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARON, RICARDO 1302 EUCLID AVENUE, #8 MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	1345 NE 17 AVE #4 FT. LAUDERDALE, FL. 33304	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1345 NE 17 AVE #4 FT. LAUDERDALE, FL 33304	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100046631821 02/15/05--01020--008 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 01/18/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

PS 282

Miami January 19, 2005

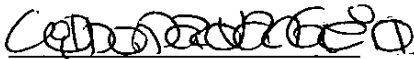
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL. 32314

TRANCETECH CORP
EIN 65-0805591
1345 NE 17 AVE #4
FT LAUDERDALE, FL. 33304

To Whom It May Concern:

With this letter I, Wilson Varon as President of the above-mentioned company, would like to inform you that I never received the initial UBR 2004 through the mail. An amendment was done with a change of address, however in our records the company still appears with the old address. Now I was inform that I had to pay the UBR 2005 but the company has been dissolved. At this moment I would like to request a waiver for the UBR 2004. I am enclosing a check in the amount of \$150.00 for payment of the UBR 2004 and another check in the amount of \$150.00 for the UBR 2005. Please take note of our new address to avoid any further confusion. Thank you for your cooperation regarding this matter.

Thank you,



Wilson Varon
President