FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000104225

TRANSATLANTIC SOFTWARE, INC.

Principal 36715 TAR	Place of	Business
36715 TAR	A AVE.	

Mailing Address

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90067 035 ***158.75



36715 TARA AVE ZEPHYHILLS FL		36/15 TARA AVE. ZEPHYHILLS FL 33541						
ACPHINICLS FL	33341	ZEFFITHILLS TE 30041			DO NOT WR	TE IN THIS SPAC	E	
					3. Date Incorporated or Qualifed			
					12/14/1998			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	_ , _]	Appl	ed For
21 5/14	ENGLE WOOD LANE	26 5114 ENGLE	Wo	OD LAN	E 59-35479°	1 [Not /	Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Ad	
City & Stat		City & State			6. Election Campaign Financing	•	5.00 м	au Po
:		28 ZEPHYRHIL	. ~	, , , , , , , , , , , , , , , , , , , 	Trust Fund Contribution		dded to	
23 <u> </u>	TYR HIUS FL Country	Zip	Cour	itrv	8. This corporation owes the cur			
24 335	<u> </u>	29 33541 3	_	•	Personal Property Tax.	D. Y]No
24 055	9. Name and Address of Current		,		10. Name and Address of New	Registered Agent	:	
	5. Name and Addition 5. Carrent			81 Name				
DORF	R, CLIFFORD W JR.		1	Do	RR CLIFFORD W idress (P.O. Box Number is Not Accept	JR.		
36715 TARA AVE.			82 Street Ac	idress (P.O. Box Number is Not Accept 4 ENGLE WOOD	able) LANE			
ZEPH	IYHILLS FL 33541		}	83 3 1 1	7 214202 2000	<u> </u>		· · · · · ·
 ,								
			Γ	84 City	'au au 'a	FL 85	Zip Co	de 541
	to the provisions of Sections 607.0502	and 607 4509 Florida Ctatutas	the eb		PHYRHLLLS	ourness of chance	ing ite re	gietored
office or I	registered agent, or both, in the State of	Florida, Such change was auti	norizea	by the corpora	ation's board of directors. I hereby acce	pt the appointmen	t as regi	stered
agent. I a	am familiar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statu	tes.				
SIGNATURE		<u> </u>				DATE		
	Signature, typed of plinted name of registered agent a OFFICERS AND		13.	igent signature requ	ADDITIONS/CHANGES TO OF		RECTOR	S IN 12
12.	T=	DELETE	1,1 TITI	<u> </u>	ADDITIONS GHANGES TO G		hange	Addition
TITLE	DODB CHECODD W ID		1.2 NA			٦,		
NAME	DORR, CUFFORD W JR.			1				
STREET ADDRESS			•	REET ADORESS				
CITY-ST-ZIP	ZEPHYHILLS FL 33541	☐ DELETE	•	Y-ST-ZIP		ПС	hange	Addition
TITLE	D CO COL COL COL	☐ DETE15	2.1 TIII			ی	nango	
NAME	BRASLOW, ALAN		2.2 NA					
STREET ADDRESS	6 BANNER RD.		2.3 STF	REET ADDRESS				
CITY-ST-ZIP	CHERRY HILL NJ 08003		-	Y-ST-ZIP			h	Addition
TITLE	D	☐ DELETE	3.1 1111			Цΰ	hange	☐ Addition
NAME	HURST, CLIFFORD		3.2 NA	AE .				
STREET ADDRESS	WELLS PLAZA WEST,STE.22		3.3 STF	REET ADDRESS				
CITY-ST-ZIP	WELLS ME 04090			Y-ST-ZIP				
TITLE	1	☐ DELETE	4.1 TITI	Æ			hange	Addition
NAME			4. 2 NA	ME				
STREET ADDRESS	5		4.3 STF	REET ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	5.1 1111	E	 -		hange	☐ Addition
NAME.			5.2 NA	ME				
STREET ADDRESS			5.3 STF	REET ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	6.1 TIT	LE			hange	Addition
NAME	1		6.2 NA	ME				
STREET ADDRESS			6.3 STF	REET ADDRESS				
CITY-ST-ZIP			6.4 ÇIT	Y-ST-ZIP				
, UIIT-31-4P	t contract to the contract to							

CITY-ST-ZIP 14. 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 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 607, Florida Statutes; and that my name appears in ed, or on an attachment with an address, with all other like empowered.