

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

FILED

Jan 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 448353 (3)

1. Corporation Name  
TRANSAMERICA EXPORT CORP.



Principal Place of Business  
2103 W 76 ST  
HIALEAH FL 33016

Mailing Address  
2103 W 76 ST  
HIALEAH FL 33016-1892

|  |  |
|--|--|
| 3. Date Incorporated or Qualified<br>04/26/1974  | 3a. Date of Last Report<br>05/20/1996  |
| 4. FEI Number<br>59-1703451  | <input type="checkbox"/> Applied For<br><input checked="" type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired<br><input type="checkbox"/>   | \$8.75 Additional Fee Required   |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>   | \$5.00 May Be Added to Fees  |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

|                                |                        |
|--------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address    |
| 21 Suite, Apt. #, etc.         | 26 7987 N.W. 33 ST.    |
| 22 City & State                | 27 Suite, Apt. #, etc. |
| 23 City & State                | 28 MIAMI, FL.          |
| 24 Zip                         | 29 33122               |
| 25 Country                     | 30 U.S.                |

|  |   |
|--|---|
| 9. Name and Address of Current Registered Agent            | 10. Name and Address of New Registered Agent          |
| JORDAN, JAMES S.<br>9370 SW 30TH TERRACE<br>MIAMI FL 33165 | 81 Name   |
|  | 82 Street Address (P.O. Box Number is Not Acceptable) |
|  | 83  |
|  | 84 City   |
|  | 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 Jordan - PRESIDENT DATE 1/11/97

| 12. OFFICERS AND DIRECTORS |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                  |
|----------------------------|--|---|------------------|
| TITLE                      | PO JORDAN, JAMES S.<br>9370 S.W. 30TH TERR<br>MIAMI FL             | 1.1 TITLE   |                  |
| NAME                       | JORDAN, JAMES S.   | 1.2 NAME  |                  |
| STREET ADDRESS             | 9370 S.W. 30TH TERR  | 1.3 STREET ADDRESS                                    |                  |
| CITY - ST - ZIP            | MIAMI FL   | 1.4 CITY - ST - ZIP                                   |                  |
| TITLE                      | S JORDAN, RITA E.<br>9370 S.W. 30TH TERR<br>MIAMI FL               | 2.1 TITLE   |                  |
| NAME                       | JORDAN, RITA E.  | 2.2 NAME  | EDUARDO AVILA    |
| STREET ADDRESS             | 9370 S.W. 30TH TERR  | 2.3 STREET ADDRESS                                    | 7987 N.W. 33 ST. |
| CITY - ST - ZIP            | MIAMI FL   | 2.4 CITY - ST - ZIP                                   | MIAMI, FL. 33122 |
| TITLE                      | S JORDAN, JAMES A.<br>18414 NW 13TH ST.<br>PEMBORKE PINES FL 33020 | 3.1 TITLE   |                  |
| NAME                       | JORDAN, JAMES A.   | 3.2 NAME  |                  |
| STREET ADDRESS             | 18414 NW 13TH ST.  | 3.3 STREET ADDRESS                                    |                  |
| CITY - ST - ZIP            | PEMBORKE PINES FL 33020  | 3.4 CITY - ST - ZIP                                   |                  |
| TITLE                      |  | 4.1 TITLE   |                  |
| NAME                       |  | 4.2 NAME  |                  |
| STREET ADDRESS             |  | 4.3 STREET ADDRESS                                    |                  |
| CITY - ST - ZIP            |  | 4.4 CITY - ST - ZIP                                   |                  |
| TITLE                      |  | 5.1 TITLE   |                  |
| NAME                       |  | 5.2 NAME  |                  |
| STREET ADDRESS             |  | 5.3 STREET ADDRESS                                    |                  |
| CITY - ST - ZIP            |  | 5.4 CITY - ST - ZIP                                   |                  |
| TITLE                      |  | 6.1 TITLE   |                  |
| NAME                       |  | 6.2 NAME  |                  |
| STREET ADDRESS             |  | 6.3 STREET ADDRESS                                    |                  |
| CITY - ST - ZIP            |  | 6.4 CITY - ST - ZIP                                   |                  |

14. I do 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 included 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 Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Jordan - PRESIDENT DATE 1/11/97 (305) 436-6011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)