


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90015 040 ***158.75

DOCUMENT # F01000001328		
1. Entity Name TRANSGLOBAL GROUP LTD. CORP.		

Principal Place of Business 620 NW 35TH STREET BOCA RATON, FL 33431	Mailing Address 620 NW 35TH STREET BOCA RATON, FL 33431
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54010558



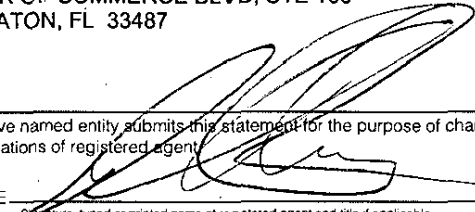
2. Principal Place of Business 701 PARK OF COMMERCE BLVD.		3. Mailing Address 701 PARK OF COMMERCE BLVD.	
Suite, Apt. #, etc. SUITE 100		Suite, Apt. #, etc. SUITE 100	
City & State BOCA RATON FLORIDA		City & State BOCA RATON FLORIDA	
Zip 33487	Country USA	Zip 33487	Country USA

02172004 Chg-P CR2E034 (10/03)

4. FEI Number 11-3190953	Applied For <input type="checkbox"/> Not Applicable
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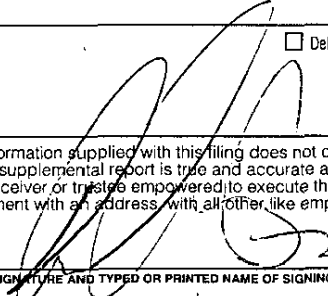
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FESSLER, DAVID G 701 PARK OF COMMERCE BLVD, STE 100 BOCA RATON, FL 33487		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FESSLER, ROBERT G 620 NW 35TH STREET BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FESSLER, ROBERT G <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 701 PARK OF COMMERCE BLVD., SUITE 100 BOCA RATON FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FESSLER, ROBERT W. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 701 PARK OF COMMERCE BLVD., SUITE 100 BOCA RATON FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FESSLER, DAVID G <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 701 PARK OF COMMERCE BLVD., STE 100 BOCA RATON FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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: 	Date 2-17-2004 Daytime Phone # 561-998-4744