

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2003 8:00 am
Secretary of State

01-14-2003 90065 028 ***150.00

DOCUMENT # F02000003214

1. Entity Name

TRANS GLOBAL TRADING INC.



Principal Place of Business

280 N. RIDGEWOOD AVE.
DAYTONA BEACH FL 32114

Mailing Address

280 N. RIDGEWOOD AVE.
DAYTONA BEACH FL 32114

2. Principal Place of Business

728 BALLOWH Rd

Suite, Apt. #, etc.

A

3. Mailing Address

728 BALLOWH Rd

Suite, Apt. #, etc.

A

City & State

DAYTONA BEACH FL

City & State

DAYTONA BEACH FL

Zip

32114

Country

USA

Zip

32114

Country

USA

6. Name and Address of Current Registered Agent

HURRICANE CUSTOMS

280 N. RIDGEWOOD AVE.

DAYTONA BEACH FL 32114

7. Name and Address of New Registered Agent

Name

HURRICANE CUSTOMS

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

728A BALLOWH ROAD

City

DAYTONA BEACH

FL

Zip Code

32114

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME VENTO, STEVE
STREET ADDRESS 280 N. RIDGEWOOD AVE.
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME Vento, Steve
STREET ADDRESS 728A BALLOWH Rd
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

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 *Steve Vento* REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-9-03

386-255-0206

CR2E034 (10/02)