

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08125

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** TRANS-AMERICA HOLDING CORPORATION

**Current Principal Place of Business:**

269 GIRALDA AVE  
SUITE 200  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

269 GIRALDA AVE  
SUITE 200  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 65-0055606

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEHRMAN, JEFFREY E ESQ  
269 GIRALDA AVENUE  
SUITE 200  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: LEHRMAN, JEFFREY E  
Address: 269 GIRALDA AVE #200  
City-St-Zip: CORAL GABLES, FL 33134

Title: EVD  
Name: PARADELLA, SOMNIA  
Address: 269 GIRALDA AVE #200  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY E LEHRMAN ESQ

D/P

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date