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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F48231** 

(7)

TRANS-GROUP UNLIMITED, INC. Principal Place of Business Mailing Address 2436 SW 8TH STREET 2436 SW 8TH STREET 700 SW 36 AVENUE 700 SW 36 AVENUE MIAMI FL 33135 MIAMI FL 33135-4124 3. Date Incorporated or Qualified 3a. Date of Last Report 09/17/1981 01/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2324474 Not Applicable 26 Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VALLS, JR. FELIPE 700 SW 38 AVE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33135** 83 **B4** City 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 Signature Appeal or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. 13. TITLE ☐ DELETE 1.1 TITLE ☐ Change ■ Addition VALLS, FELIPE, SR. 1.2 NAME NAME CR2E034 700 SW 36 AVENUE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY - S1 - ZIP 1.4 CITY-ST-ZIP DS DELETE Change Addition TITLE 2.1 TITLE VALLS, FELIPE, JR. 2.2 NAME NAME 700 SW 36 AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CHTY-S1-7IP 2. 4 CITY-ST-ZIP DELETE Change Addition 31 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-SI-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-\$1-79 4.4 City-St-ZiP ☐ Change DELETE Addition TITLE 51 TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CHY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS

SIGNATURE:

appears in Block 12 or Block 13 (Lchai

CHY-ST-ZIP

FELIPE A.VALLS, JR SECRETARY 2-19-97

iont with an address.

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 indicated on this annual report or supplemental arrival 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 deliver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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**FILED** 

Mar 03 1997 8:00am

Secretary of State