FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY 11 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000002261 (5)

1. Corporate Name

TRANSGLOBAL SYSTEMS, INC.

Principal Place of Business: 515 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301

Mailing Address: 515 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/03/1994

3a. Date of Last Report:

4. FEI Number: 65-0471749 — Applied For / Not Applicable

2. Principal Place of Business — 21 / Suite, Apt. #, etc. 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address — 26 / Suite, Apt. #, etc. 27 / City & State 28 / Zip 29 / Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
NACKSON, ALYSE J 515 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 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 ______ DATE ______

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	SOINSKI, E. DREW
STREET ADDRESS	515 E. LAS OLAS BLVD.
CITY-ST-ZIP	FT. LAUDERDALE FL 33301
TITLE	STD
NAME	NACKSON, ALYSE J
STREET ADDRESS	515 E. LAS OLAS BLVD.
CITY-ST-ZIP	FT. LAUDERDALE FL 33301
TITLE	D
NAME	NOBLETT, PAUL
STREET ADDRESS	515 E. LAS OLAS BLVD.
CITY-ST-ZIP	FT. LAUDERDALE FL 33301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (1.1–6.4 TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP; ☐ Change ☐ Addition) — blank

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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: Alyse J. Nackson 5/9/95 (305) 761-3455

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0210443 CP