

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H14806 1. Entity Name TRANSATLANTIC BANK					
Principal Place of Business 48 EAST FLAGLER STREET MIAMI, FL 33131-1020			Mailing Address 48 EAST FLAGLER STREET MIAMI, FL 33131-1020		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2422390	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
Name Street Address (P.O. Box Number is Not Acceptable) City State Zip Code			Name Robert Moskowitz, Esq. Street Address (P.O. Box Number is Not Acceptable) 48 East Flagler Street City Miami, FL 33131		
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 <u>Robert Moskowitz</u> Robert Moskowitz General Counsel					
(NOTE: Registered Agent signature required when reappointing)					
DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	TITLE	NAME
D	ROK, SERGIO	48 E. FLAGLER ST.	MIAMI, FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete					
DVC	MESA, JULIAN L	9270 S.W. 93RD AVE	MIAMI, FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete					
D	GOLD, SALOMON	48 E FLAGLER ST	MIAMI, FL 33131	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete					
D	LERMAN, JORGE	48 EAST FLAGLER ST	MIAMI, FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete					
D	ROK, NATAN R	48 EAST FLAGLER ST	MIAMI, FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input checked="" type="checkbox"/> Delete					
<input type="checkbox"/> Delete					
<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: <u>Robert Moskowitz</u> Robert Moskowitz General Counsel					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date <u>4/6/05</u> Daytime Phone #					

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05 APR 21 AM 10:43
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STATE
TALLAHASSEE, FLORIDA



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