## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE

DOCUMENT #
1. Corporation Name M51138

(9)

TRANS	S-CONTINENTAL BROKERS	NC.		)	
Principal Plac	e of Business	Mailing Address		10018011 101 01101 11001 11001 11101	
C/O GERARD LALIBERTE 22904 GREENVIEW TERRACE BOCA RATON FL 33433-3521  C/O GERARD LALIBERTE 22904 GREENVIEW TERRACE BOCA RATON FL 33433-3521  BOCA RATON FL 33433-3521			RACE		
9 Dringhal C	0			<ol> <li>Date Incorporated or Qualified 04/29/1987</li> </ol>	3a. Date of Last Report 05/01/1995
2. Principal P	Place of Business    CLINT ModRE RI	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.			NT MOORE R.	P 59-2798988	Not Applicable
22 50	ITE 324	Suite, Apt. #, etc. 27 SU/TO	= 324	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat 23 <b>B</b> O C		City & State	TON FC	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
2ip 3334	96 25 11 S A	29 33496	Country 30 US A	8. This corporation has liability for i	
	9. Name and Address of Current		100 03 74	Florida Statutes Yes  10. Name and Address of New R	
			81 Name /	4 4 4 4	
	ite, gerard		20	ALIBERTE	GERARD
22904 G	REENMEW TERRACE		82 Street Addre	ess (P.O. Box Number is Not Acceptable	LAKE CIRCLE
BOCA R	ATON FL 33433-3521		83	B / L L I Vy /	ZIME CIRCLE
			84 City		
44 5				CA RATON	FI 85 Zip Code
or register	to the provisions of Sections 607,0502 a red agent, or both, in the State of Florida th, and accept the obligations of, Sectio	ind 607.1508, Florida Statute			
familiar wii SIGNATURE	th, and accept the obligations of, Sectio	n 607.0505, Florida Statutes.	,,	o. o	intment as registered agent. I am
	Signature typed in printed name of registered agent ar		P D L AL I B. E: Registered Agent signature required	when reinstatuol	april 15, 96
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	FRS AND DIRECTORS IN 10
TITLE	61	DELETE	1. 1 TITLE		Change Addition
AME	LALIBERTE GENEVIEVE	• -	1.2 NAME		
STREET ADDRESS	22904 GREENVIEW TERR.		1.3 STREET ADDRESS		
CITY-SI-ZIP TITLE	BOCA RATON FL		1.4 CITY-ST-ZIP		
IAME	PV S, T.	☐ DELETE	2 1 TITLE		Change Addition
STREET ADDRESS	Laliberte, Gerard 22904 Greenview Terrace		2.2 NAME		_
CITY-ST-ZIP	BOCA RATON FL		2.3 STREET ADDRESS		
ITEE	BOCK RATON PL	□ DELETE	24 CITY+ST-ZIP		
AME		[] DELETE	3. 1 TITLE		Change Addition
TREET ADDRESS			3.2 NAME		
ITY - ST - ZIP			3.3. STREET ADDRESS		
TLE		DELETE	3.4 CITY-ST-ZIP		
AME		<u></u>	4.2 NAME		☐ Change ☐ Addition
TREET ADDRESS			4.3 STREET ADDRESS		
ITY-ST-ZIP			4.4 CITY-ST-ZIP		
Î L F		DELETE	5. 1 TITLE		Character Character
AME			5 2 NAME		☐ Change ☐ Addition
IREET ADDRESS			5.3 STREET ADDRESS		
TY-ST-ZIP		·	5.4 CITY - ST - ZIP		
TLE		☐ DELETE	6. 1 TITLE		☐ Change ☐ Addition
AME			6.2 NAME		E
REET ADDRESS			6.3 STREET ADDRESS		
TY-ST-ZIP	and that the inferred	·	6.4 CITY - ST-ZIP		
oatri; mat i a	certify that the information supplied with the information indicated on this annual r am an officer or director of the corporati Block 12 or Block 13 if changed, or on a	on or the receiver or trucker -	-1	the exemption stated in Section 119.07 and that my signature shall have the sa eport as required by Chapter 607, Floric	(3)(k), Fiorida Statutes. I further me legal effect as if made under da Statutes; and that my name

alike & GERARD LALIBERTE