

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000067345

FILED  
Feb 15, 2006  
Secretary of State

Entity Name: TRANSACT REALTY COMMERCIAL SERVICES, INC.

## Current Principal Place of Business:

730 SOUTH ATLANTIC AVENUE  
SUITE 103  
ORMOND BEACH, FL 32176

## New Principal Place of Business:

730 SOUTH ATLANTIC AVENUE  
SUITE 101-103  
ORMOND BEACH, FL 32176

## Current Mailing Address:

730 SOUTH ATLANTIC AVENUE  
SUITE 103  
ORMOND BEACH, FL 32176

## New Mailing Address:

730 SOUTH ATLANTIC AVENUE  
SUITE 101-103  
ORMOND BEACH, FL 32176

FEI Number: 59-3668817

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, D. S  
3000 N. ATLANTIC AVENUE  
UNIT 5  
DAYTONA BEACH, FL 32118 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GUINDI, SHERIFF  
Address: 730 SOUTH ATLANTIC AVENUE, SUITE 101-103  
City-St-Zip: ORMOND BEACH, FL 32176

Title: STD ( ) Delete  
Name: PATEL, D. S  
Address: 3000 N. ATLANTIC AVENUE, #5  
City-St-Zip: DAYTONA BEACH, FL 32118

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: PATEL, D. S  
Address: P.O. BOX 2042  
City-St-Zip: ORMOND BEACH, FL 32175

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHERIFF GUINDI

PRES

02/15/2006

Electronic Signature of Signing Officer or Director

Date