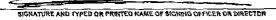
2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2006 08:00 AM Secretary of State DOCUMENT # P03000017178 TRANSATLANTIC PROPERTIES, INC. Principal Place of Business Mailing Address 13359 CHAMBORD STREET 13359 CHAMBORD STREET BROOKSVILLE, FL 34613 BROOKSVILLE, FL 34613 04212006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 20-0179056 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent JONES, JAMES R JR. DO NOT WRITE 11120 LIBBY ROAD SPRING HILL, FL 34609 IN THIS SPACE 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, typed or printed name of registered agent and rite if applicable. (NOTE: Registered Agent signature required when reinstating) U00000534563 FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. 05/08/06-80017-004 150.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE VANSTYN, INGO NAME STREET ADDRESS 13359 CHAMBORD STREET CITY-ST-ZP BROOKSVILLE, FL 34613 3377 VANSTYN, HERBERT NAME 13359 CHAMBORD STREET STREET ADDRESS BROOKSVILLE, FL 34613 CDY-ST-782 TITLE NAME STREET ADDRESS DO NOT WRITE CYTY-ST-ZYP IN THIS SPACE NAME STREET ADDRESS CITY-5T-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 trusted 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:

NAME STREET ADDRESS CITY-ST-ZIP



FILED