## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000031790

FILED Apr 29, 2004 Secretary of State

Entity Name: TRANSBAN MONEY TRANSMITTER CORP. **Current Principal Place of Business: New Principal Place of Business:** 3306 PONCE DE LEON BLVD 17110 ARVIDA PARKWAY CORAL GABLES, FL 33134 SUITE #1 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 3306 PONCE DE LEON BLVD 17110 ARVIDA PARKWAY CORAL GABLES, FL 33134 SUITE#1 WESTON, FL 33326 FEI Number: 26-0062359 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION COMPANY OF MIAMI OCTAVIO, MARIELENA 201 S BISCAYNE BLVD STE 1500(BB) 17110 ARVIDA PARKWAY MIAMI, FL 33131 US SUITE #1 WESTON, FL 33326 US 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: MARIELENA OCTAVIO 04/29/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: ( ) Change (X) Addition VELUTINI, BERNARDO Name: Name: 3200 NE 190 STREET Address: Address: AVENTURA, FL 33180 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: ( ) Change (X) Addition Name: Name: REEVES, GEORGE 3200 NE 190 STREET Address: Address: AVENTURA, FL 33180 City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete VP/S Name: OCTAVIO, MARIELENA Name: 3200 NE 190 STREET Address Address: City-St-Zip: City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIELENA OCTAVIO VP 04/29/2004