FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 05, 1999 8:00 am Secretary of State

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05-05-1999 90179 004 ***150.00

DOCUMENT # P12891

1. Corporation Name

Principal Place of Business

TRANSCAPITAL FINANCIAL CORPORATION

1221 BRICKELL AVE. SUITE 2600 MIAMI FL 33131 US 2. Principal Place of Business		1221 BRICKELL AVE. SUITE 2600 MIAMI FL 33131 US 2a. Mailing Address				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/14/1987 4. FEI Number Applied For				
21		26				54-0886031	N	ot Applicable	1	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75 Additional			
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution S 5.00 May Be Added to Fees				
Zip 24	Country Zip 29 30			ntry] Yes	3No		
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Ago	ent		1	
CORPORATE CREATIONS ENTERPRISES, INC.				81	Name Street A	ddress (P.O. Box Number is Not Acceptable)			1	
	PGA BLVD., SUITE 211					Addition (1.0. Dox Humber to Hor Hoodpearer)				
PALI	M BEACH GARDENS FL 33418		ĺ	83					1	
			1	84	City	<u>FL_</u>	11.	Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE	Signature, typed or printed name of registered agen	t and title if epolicable. (NOTE: Re	gistered	Agent	signature reg	uired when reinstating) DATE			- ا	
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTO	OR\$ IN 12	1 8	
TITLE	PD	☐ DELETE	1.1 TITLE		$\overline{}$] Change	☐ Addition	} {	
NAME	Burstein, Jack D.		1.2 NAME) 3	
STREET ADDRESS	1221 BRICKELL AVE.,#2600		1.3 STI	1.3 STREET ADDRESS) §	
CITY-ST-ZIP	MIAMI FL				ZIP		7 Change	ET Addition	ļ ģ	
TITLE	VD	DELETE				Ĺ] Change	Addition	`	
NAME	COOK STEVEN R.		2.2 NAME 2.3 STREET ADDRESS		40DDE00				İ	
STREET ADDRESS	1221 BRICKELL AVE., SUITE 2	800		-	- 1				{	
CITY-ST-ZIP TITLE				2.4 CITY-ST-ZIP 3.1 TITLE] Change	☐ Addition	1	
NAME	BRIERLEY, RICHARD G			ME	-				1	
STREET ADDRESS	1221 BRICKELL AVE. #2600		' 3.3 S∏	REET	ADDRESS				1	
CITY-ST-ZIP	1111/11111 1 6			1Y-\$1	- ZIP				1	
TITLE	D DELETE 4.1T			LE] Change	Addition	1	
NAME	ONIDERO, NOBERT III			WE	ļ)	
STREET ADDRESS	1221 BRICKELL AVE. #2600				ADDRESS				1	
CITY-ST-ZIP	MIAMI FL	☐ DELETE	4.4 CM		ZIP		Change	Addition	-	
TITLE (C) DECEIE	5.1 TIT 5.2 NA		j	L	אליינטויאם	الانتانان ال		
NAME STREET ADDRESS					ADDRESS					
STREET ADDRESS CITY- ST-ZIP			5.4 CIT		!					
TITLE		☐ DELETE	6.1 TIT				Change	☐ Addition	1	
NAME			6.2 NA	ME	-	-	-			
STREET ADDRESS			6.3 ST	REET.	ADDRESS					
CITY-ST-ZIP			6.4 CIT	Y-ST	- ZIP				}	

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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