2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 19, 2008 08:00 A Secretary of State DOCUMENT # P22503 1. Entity Name TRANEL INC. Principal Place of Business Mailing Address 40 E. 69TH ST. 40 E. 69TH ST. NEW YORK, NY 10021 NEW YORK, NY 10021 US CR2E034 (11/05) 01112008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-1790703 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KALEITA, GARY M DO NOT WRITE 215 NORTH EOLA DRIVE IN THIS SPACE ORLANDO, FL 32801 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. t am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ROSEN, JONATHAN P NAME n4/ñ3/ñ3-8ñ1ñ9-009 150.00 40 E. 69TH ST. STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10021 TITLE BOBROW, IRVING NAME 40 E. 69TH ST. STREET ADORESS CITY-ST-ZIP NEW YORK, NY 10021 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.