FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Aug 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000025015

1. Corporation Name
Trans Ocean Enterprises INC.

Principal Place of Business	Mailing Address
6525 Collins Ave Miami Beach, FL 33141	6538 Collins Ave., #204 Miami Beach, FL 33141

2. Principal Place of Business	2a. Mailing Address
21 6525 Collins Ave.	26 6538 Collins Ave
Suite, Apt. #, etc. 22 Miami Beach, Fl	Suite, Apt. #, etc. 27 #204
City & State 23 33141 USA	City & State 28 Miami Beach, Florida
Zip 24 / Country 25	Zip 29 33141 / Country 30 USA

3. Date Incorporated or Qualified: April 6, 1993
3a. Date of Last Report: 11/6/96
4. FEI Number: 59-3175965 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

Trans Ocean Enterprises, Inc.
c/o Richard A. Jacobson
3750 Gunn Hwy., Suite #1B
Tampa, Fl 33624

10. Name and Address of New Registered Agent

81 Name: Garrick R. Stephens
82 Street Address (P.O. Box Number is Not Acceptable): 6538 Collins Ave., #204
83
84 City: Miami Beach FL 85 Zip Code: 33141

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: Garrick R. Stephens DATE: 8.24.97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	President	☐ DELETE
NAME	Konstantin K Atanassov	
STREET ADDRESS	6538 Collins Ave., #204	
CITY-ST-ZIP	Miami Beach, FL 33141	
TITLE	Vice President	☐ DELETE
NAME	Garrick R Stephens	
STREET ADDRESS	6538 Collins Ave., #204	
CITY-ST-ZIP	Miami Beach, FL 33141	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS	PC 8.27	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME	900002280199	
6.3 STREET ADDRESS	-08/28/97--01108--009	
6.4 CITY-ST-ZIP	***558.75	

CR2E034 (9/96)

14. I do 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.

SIGNATURE: Garrick R. Stephens 8.24.97 305/951-0283
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #