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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000069162 (4)

TRANSEAGLE TRAVEL CORP.

FILED Jan 20 1998 8:00am Secretary of State

	ce of Business	Mail	ing Address				
2750 WEST	68 STREET	2750 WEST 68TH 8T. SUITE 123					
SUITE 123 HIALEAH FL	33016		ALEAH FL 33016				DO NOT WRITE IN THIS SPACE
US		• • • • • • • • • • • • • • • • • • • •	CENTER DOOL				3. Date Incorporated or Qualified
							07/21/1993
2. Principal P	Place of Business	2a. N	Mailing Address				4. FEI Number Applied For
21	SAME	26					65-0444477 Not Applicable
Suite, Apt.	. #, etc.	{	Suite, Apt. #, etc.	·			5. Certificate of Status Desired S8.75 Additional
22		27					Fee Required
City & Stat	te	ļ	City & State				Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution
Zip			— —	untry	•	8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Address of Cur	29	and Ament	30	1		Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent
		ieni negiste	red Agent		81	Name	10. Name and Audress of New Registered Agent
	CHIRILO, MANUEL				١*`	Name	SAME
2750 West 68th St. Suite 123					82	Street A	Address (P.O. Box Number is Not Acceptable)
	ALEAH FL 33016				83		
l Lui	ALEAN PL 33016				63		
<u> </u>					84	City	FL 85 Zip Code
44 Dureupht	to the provisions of Sections 607 (Eng and Eng	1509 Florido Stati	iter the c	hour	nomed c	corporation submits this statement for the purpose of changing its registered
l office or r	registered agent, or both, in the Sta	ate of Florida	. Such change was	authorize	d by	the corpo	oration's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the ob	ligations of,	Section 607.0505, F	lorida Sta	tutes	6.	
SIGNATURE	Signature, typed or printed name of registered	and tale if	thic children	NTC D			(equired when reinstaling) DATE
12.		AND DIRECT		13.	о ядо	in signature is	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPVS		DELETE	1.1 1	ITLE	- 1	☐ Change ☐ Addition
NAME	PICHIRILO, NURIS			1.2 N			_ · -
STREET ADDRESS	10329 NW 127TH ST.			135	TREFT	ADDRESS	
CITY-ST-ZIP	HIALEAH GARDENS FL 33	016			ITY-S	1	
TITLE	—		DELETE	2.1 7			☐ Change ☐ Addition
NAME	PICHIRILO, NURIS			2.2 N	AME	[*
STREET ADDRESS	10329 NW 127TH ST.			2.3 \$	TREET	ADDRESS	
CITY-ST-ZIP	HIALEAH GARDENS FL 33	016				it - ZIP	
TITLE			DELETE	3.1 T			Change Addition
NAME				3.2 N	AME		
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP						T-ZIP	Í
TITLE	***************************************		DELETE	4.1 T	-		☐ Change ☐ Addition
NAME				4.21	AME		
STREET ADDRESS				4.3 S	IREET	ADDRESS	
CITY - ST - ZIP				4.4 0	ITY - S	T-ZIP	
TITLE			DELETE	5.1 T	TLE		☐ Change ☐ Addition
NAME				5.2 N	AME	- 1	
STREET ADDRESS				5.3 S	REET	ADDRESS	
CITY-ST-ZIP				5.4 C	TY - \$1	T-ZIP	
TITLE			DELETE	6.1 T			☐ Change ☐ Addition
NAME				6.2 N	AME	1	j
STREET ADDRESS				6.3 S	TREET	ADDRESS	
CITY - ST - 7IP					TY - S1		

14. 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.

CIONATURE.

JAW-6-98