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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000083946 (2)

TRANS-VOYAGE, INC.

Principal Place of Business P.O. BOX 618223

Mailing Address

P.O. BOX 616223

## **FILED** Mar 12 1997 8:00am Secretary of State

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			OHLANDO PL 32001-0223					
					3. Date Incorporated or Q 12/02/1993		Date of Last R 5/01/1996	eport
2. Principal Piace of Business 21]			2a. Mailing Address		4. FEI Number	<u> </u>	, Ap	plied For
			26		59-3216971			t Applicable
Surte, Apt. # 2 323	#, etc HAVELOC	k st	Suite, Apt. #, etc. 27 P.O. Box	170458	5. Certificate of Status Dec	sired 🔲	\$8.75 / Fee Re	
City & State ORUA	NDO F		City & State 28 ORLANDO	FL.	6. Election Campaign Fina Trust Fund Contribution		<b>\$5.00</b> Added t	
Ziρ	Сос	intry	Zφ	Country	8. This corporation has lia	bility fo <u>r intangib</u>	ole tax under s	. 199.032.
24 3282		USA		30 USA	Florida Statutes	☐ Yes		
		dress of Current	Registered Agent	91 Nome	10. Name and Address of	New Registere	d Agent	
	onica, agnes	_		81 Name	VONICA AGNE	S		
	WALDEN CIRCLE	•		82 Street A	Address (P.O. Box Number is Not A	Acceptable)		
	E 1721			323	3 HAVELDEK 3	STREET		
ORLA	ANDO FL 32811			83				
				84 City			85 Zip.	Code
	v			1 00	LANDO	F	_   0**	824
11. Pursuant to	to the provisions of S egistereN agent, or b	Sections 607 0502 noth, in the State c	and 607.1508, Florida Statute If Florida, Such change was a	es, the above-named authorized by the corp	corporation submits this statement poration's board of directors. I here	for the purpose by accept the a	of changing it ppointment as	is registered realstered
agent. Lar	m tanillal with and a	accept the obligat	ions of, Section 607.0505, Fic	orida Statutes.				
SIGNATURE .	. 🛠 —		a Agnes e	ANONICA	VICE PRESIDEN	ST O	3.07-	97
	Signature. Typical or production	sach, of registered agen	and title if applicable. (NOTI	: Registered Agent signature	required when reinstating)	DATE	ND DIDECTOR	0.10.40
12.		OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES 1	O OFFICERS AT	NO DIRECTOR	(S IN 12
						<del> </del>	Change	Addition
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The response of the comparation of the comparation of the comparation indicated an 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 comparation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 13 inchanged, or on an attachment with an address.

SIGNATURE:

407-856-829D