

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # **P94000031549**

1. Corporation Name

**TRANSGLOBAL INTERNATIONAL CORP.**

Principal Place of Business

2027 N.W. 7TH AVENUE  
MIAMI FL 33127

Mailing Address

2027 N.W. 7TH AVENUE  
MIAMI FL 33127

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

*Same*  
Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/22/1994

5. FEI Number

65-0487406

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	SEPIASHVILI, DAVID	2027 N.W. 7TH AVENUE	MIAMI FL 33127
STD	GROMOV, ALEXANDER	2027 N.W. 7TH AVENUE	MIAMI FL 33127

500003093895-8  
-11/02/99--01098--017  
\*\*\*908.75 \*\*\*908.75

LS

8. Name and Address of Current Registered Agent

OSMAN, L. MICHAEL  
1474-A W. 84TH STREET  
HIALEAH FL 33050

9. Name and Address of New Registered Agent

Name *Alexander Gromov*  
Street Address (P.O. Box Number is Not Acceptable)  
*2027 N.W. 7th Ave.*  
Suite, Apt. #, Etc.

City

*Miami*

State

*FL*

Zip Code

*33127*

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent *[Signature]*  
REGISTERED AGENT MUST SIGN

Date *2/22/99*

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☐ No ☐

(See other side for information  
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/22/99*  
Date

Daytime Phone #