FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P94000069238 (1)

1. Corporation Name
THE TRANSEAGLE CORPORATION

Principal Place of Business
1401 E. BROWARD BLVD.
SUITE 201
FT. LAUDERDALE FL 33301

Mailing Address
1401 E. BROWARD BLVD.
SUITE 201
FT. LAUDERDALE FL 33301

3. Date Incorporated or Qualified: 09/19/1994
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0574557 — 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

2. Principal Place of Business: 21 2001 S.E. AirporT Rd; Suite, Apt. #, etc. 22; City & State 23 STuarT, Florida; Zip 24 34996; Country 25 USA

2a. Mailing Address: 26 2001 SE AirporT Rd; Suite, Apt. #, etc. 27; City & State 28 STuarT, Florida; Zip 29 34996; Country 30 USA

9. **Name and Address of Current Registered Agent**
STEPHANY, EDWARD G
1401 E. BROWARD BLVD.
SUITE 201
FT. LAUDERDALE FL 33301

10. **Name and Address of New Registered Agent**
81 Name: Donald L. Millroy
82 Street Address (P.O. Box Number is Not Acceptable): 2001 SE AirporT Rd
83
84 City: STuarT, Florida FL 85 Zip Code: 34996

11. Pursuant to the provisions of Sections 607.0502 and 614.1508, 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 [signature] DATE 4/12/96

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	STEPHANY, EDWARD G	
STREET ADDRESS	850 SE SEVENTH ST SUITE A	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	PresidenT	☐ DELETE
NAME	Joel R. Goheen	
STREET ADDRESS	307 Hawks Moor Ct.	
CITY-ST-ZIP	Charlotte, N.C. 28262	
TITLE	Exec. Vice President	☐ DELETE
NAME	Donald L. Millroy	
STREET ADDRESS	2001 SE AirporT Rd	
CITY-ST-ZIP	STuarT, FL. 34996	
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		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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: DONALD L. MILLROY [signature] JR — 4/12/96 — 407 575 1999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

CR2E034 (12/95)