FLORIDA DEPARTMENT OF STATE Secretary of State DUNSION OF CORPORATIONS         FLORIDA DEPARTMENT OF STATE Secretary of State DUNSION OF CORPORATIONS         DOCUMENT # P940000077768         1 Corporation Name         TRANS-GLOBAL GROUP, INC.         4000099222914 04/27/07-01002-022 ##1855.00         2. Propertion Name         12120 SW 97TH TER         12120 SW 97TH TER         12120 SW 97TH TER         12120 SW 97TH TER         10/24/1994         CREED 10/24/1994         655/0531644         Manuel Ourse and Address of Current Registered Agent         MIAMI FL         7. Name and Address of Current Registered Agent         MIAMI FL         10/24/1994         65/05/31644         Manuel Address of Current Registered Agent         MIAMI FL         10/24/1994         65/05/31644         Manuel Address of Current Registered Agent         MIAMI FL         10/24/1994         65/05/31644         Manuel Address Agent		1	PLEASE READ A	ALL INSTRUCT	IONS BEFORE C			
ADDODSIZES114 TRANS-GLOBAL GROUP, INC.         ADDODSIZES114 04/27/0701002022 **1865.00         REINSTATEMENT /4%-2         2. Principal Office Address - No P.O. Box # 12120 SW 97TH TER 12120 SW 97TH TER 12120 SW 97TH TER         Suite, Apt. #, etc.         * Date Incorporated or Qualified To Do Business in Florida 2000 Suite, Apt. #, etc.         Suite, Apt. #, etc.         * Date Incorporated or Qualified To Do Business in Florida 2000 Suite, Apt. #, etc.         * Date Incorporated or Qualified To Do Business in Florida 2000 Suite, Apt. #, etc.         * Date Incorporated or Qualified To Do Business in Florida 2000 Suite, Apt. #, etc.         * Name and Address of Current Registered Agent         ***********************************				Secretar	y of State			
TRANS-GLOBAL GROUP, INC.       4000099222914 04/27/0701002022 **1865.00         RINSTATEMENT /4%-2         * Ditto Address - No P.O. Box # 12120 SW 97TH TER       * Mailing Office Address 12120 SW 97TH TER         Suite, Apt. #, etc.       * Date Incorporated or Qualified to Do Business in Florid To Do Business in Florid 10/24/1994         City & State MIAMI FL       Suite, Apt. #, etc.         * Date Incorporated or Qualified to Do Business in Florid 2000       10/24/1994         City & State MIAMI FL       City & State MIAMI FL       * Date Incorporated or Qualified to Do Business in Florid 2000         Zip 33186       Country 33186       Country 33186       Country 33186       Country 33186       State MIAMI FL         Wite, Apt. #, etc.       * Itere instatement fee is imposed, except in Circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking this box, you are certifying the prior notices. By checking the prior notices. By checking the prior notices. By checking the prior notices. By checking adoptind the registered agent of the glove named cor						SECRETAHY OF STA TALLAHASSEE, FLORI	DA	
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City & State       City & State       10/24/1994         MIAMI FL       MIAMI FL       Applied For         Zip       33186       USA       Zip         33186       USA       Zip       33186       USA         Image: A central content of the second and address of Current Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent         Image: Address of Content Address of Current Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent         Image: Address of Content Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent         Image: Address of Content Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent         Image: Address of Content Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent         Suite, Apt. #, Etc.       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent         Image: Address of Current Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent       Image: Address of Current Registered Agent         Suite, Apt. #, Etc.       Image: Addres	A Principal Unice Address - No P.U. Box # J J. Mailing Unice Address							
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7. Name and Address of Current Registered Agent         MARIO SANCHEZ JR       The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.         Suite, Apt. #, Etc.       State       331866         B. I, being appointed the registered agent of the above named corporation, am familiar with end accept the obligations of section 607.0505 or 617.0503, F.S.       Date       04-23-07         Signature of Registered Agent       Name of Officers and/or Directors       Street Address of Each Officer and/or Director       Street Address of Each Officer and/or Directors       City / State / Zip	3318	36	USA USA	<sup>z</sup> <sup>2</sup> 33186	USA	6. S8.75 Additional Fee requ	uired	
Street Address (PS Box Norther in No. Art place)       Circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.         Suite, Apt. #, Etc.       State       33186         Image: State of Registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.       Signature of Registered Agent       Date       04-23-07         Image: Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)       Street Address of Each Officer and/or Directors       Street Address of Each Officer and/or Director         Titles       Name of Officers and/or Directors       Street Address of Each Officer and/or Director       City / State / Zip			7. Name and Address of	Current Registered Ager	nt			
Street Address of IS WY 97*THATER       the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.         Suite, Apt. #, Etc.       State       33186         WIAMI       FL       33186         8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.       Signature of Registered Agent       Date       04-23-07         9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)       Street Address of Each Officer and/or Director (Corporations Corporations	MAF	RIO S	ANCHEZ JF	2				
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REGISTERED AGENT MUSERIO         9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)         Titles       Name of Officers and/or Directors       Street Address of Each Officer and/or Director       City / State / Zip	8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.							
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10. 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 contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shell have the same legal effect as if made under oath. SIGNATURE: Description:								