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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028047 (5)

TRANSNATIONAL CONSULTING, INC.

Principal Place of Business

13805 SO. DIXIE HIGHWAY STE 136-475

Mailing Address

13605 SO. DIXIE HIGHWAY STE 136-475

FILED May 01 1997 8:00am Secretary of State



MIAMI FL 33178-7252		MIAMI FL 33178-7252			
				3. Date Incorporated or Qualified 04/05/1995	3a. Date of Last Report 08/07/1996
	lace of Rusiness	2a. Mailing Address		4. FEI Number	Applied For
		26 136155,	DIXIE HW	59-2203669	Not Applicable
Sulte, Apt.	E 114-475	Suite Apt. #, etc. 27 STE II 4	475	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	"IAMI, FL	City & State	, FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24 33	176 25 DADE		DADE		Yos No
	9. Name and Address of Current F	Registered Agent		10. Name and Address of New Reg	Istered Agent
DAR	ROW, KENNETH F ESQ.		81 Name		
	O SOUTH DADELAND BLVD. STE 4	112	B2 Street Ad	dress (P.O. Box Number is Not Acceptable	0)
	MI FL 33156	· ·-	bz Sireet Au	oress (P.O. Box Number is Not Acceptable	0)
			83		
			84 City		FI B5 Zip Code
11. Pursuant office or reagent. La	to the provisions of Sections 607.0502 a egistered agont, or both, in the State of m familiar with, and accept the obligation	and 607.1508, Florida Statutes Florida. Such change was au ons of, Section 607.0505, Flori	s, the above-named co thorized by the corpor da Statutes.	orporation submits this statement for the puration's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent :	and title if applicable (NOTE)	Fiegistered Ager4's gnature rec	usited when reinstating)	DATE
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	11 TITLE		Change Addition
NAME	REILLY, ROBERT		1.2 NAME		-
STREET ADDRESS	C/O 13605 S. DIXIE HIGHWAY S	TE 136-475	1.3 STREET ADDRESS	13615 5. DIXIE HU	MY, STE 114
CITY-ST-ZIP	MIAMI FL 33176-7252		14 CITY-ST-ZIP		· •
TITLE		☐ DELETE	21 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			22 NAME		-
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 C/TY- ST-7IP		·
TITLE		☐ DELETE	31 THLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			3.2 NAME		ı
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 C(1Y - S1 - Z)P		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHY - S1 - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		ı	6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	au codify that the information supplied u	with this filing does not a wife	for the eventuation state	ad in Section 110 07(3Vi) Florida Statutos	Lighter cortifulliating

14. I do 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.

ONATION P. 1 A. T. DO. '00. ROPET IL RELIV 4/23/07 201.256-0115