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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500036569 (8)

TRANS CONTINENTAL, INC.

FILED
May 12 1998 8:00am
Secretary of State



Principal Place of Business Mailing Addross						<u> </u>	
•							
7380 SAND LAKE ROAD SUITE 350		SUITE 350	7380 SAND LAKE ROAD SUITE 350				
ORLANDO FL 32819		ORLANDO FL 3281	ORLANDO FL 32819			DO NOT WRITE IN THIS SPACE	
					<ol> <li>Date Incorporated or Qualified</li> <li>05/05/1995</li> </ol>		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			59-3438383	Not Applicable	
Suite, Apt. #, etc.		<u></u>	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22						Fee Required	
<b>─</b> `				6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees		
<b>23</b> Zip	Country		Zip Coun		8. This corporation owes or has paid the cu		
24	25	29	30	•		Yes X No	
	9. Name and Address of Currer		. 1271		10. Name and Address of New Registered		
PRI	NGLE, WILLIAM B III			81 Nan	ne ne		
7380 SAND LAKE ROAD				<b>82</b> Stre	et Address (P.O. Box Number is Not Acceptable)		
SUITE 350				0.00	or riddress (1 %. box ridinger to rior ricesplately		
OR			83				
			l	<b>84</b> City		85 Zip Code	
44 5	1 D - 1 C -	07 4000 Florida 0	tet to the of		FL	d at an alm a its sociations of	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, typed or printed name of registered agent and title diapplicable. (NOTE Registered Agent signature required when reinstating)  DATE							
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TIT	TLE		Change Addition	
NAME	<b>Pearlman</b> , Louis J		1.2 NA	ME			
			1.3 Sī	REET ADDRES	s	5	
CITY-ST-ZIP	ORLANDO FL 32819			TY-ST-71P			
TITLE	D	☐ DELETE	2.1 TH	rle		☐ Change ☐ Addition ☐	
NAME	FISCHETTI, ROBERT S		2.2 NA	ME			
STREET ADDRESS	7380 SAND LAKE ROAD SU	ITE 350		REET ADDRES	SS		
CITY-ST-ZIP	ORLANDO FL 32819	Chicere		11Y - \$1 - ZIP		Obania III Addition	
TITLE	SIEGEL, ALAN	DELETE				Change Addition	
NAME OTRET ADDRESS	7380 SAND LAKE ROAD SU	ITE 350	3.2 NA				
STREET ADDRESS	ORLANDO FL 32819	11L 050	1	REET ADDRES	8		
CITY-ST-ZIP TITLE	n	DELETE		ITY-ST-ZIP		Change Addition	
NAME	SICOLI, FRANK	L 222. L	4. 2 N				
STREET ADDRESS	7380 SAND LAKE ROAD SU	ITE 350		REET ADDRES	s		
CITY-ST-ZIP	ORLANDO FL 32819	··· — ***	1	1Y-S1-ZIP			
TITLE		☐ DEL <b>e</b> te				Change Addition	
NAME			5.2 NA	ME			
STREET ADDRESS			5 3 ST	REET ADDRES	s		
CITY-ST-ZIP			5.4 Cf	TY-ST-ZIP			
TITLE		☐ DELETE	6.1 TIT	ΓLE		Change Addition	
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET ADDRES	s		
CITY-ST-ZIP	<del></del>		6.4 CI	TY-ST-ZIP			
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I nereby 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 eath; 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 13 if changed, or on an altradiment, with an address.