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 # **P95000054581 (0)**

1. Corporation Name

TRANSLEISURE AMERICA, INC.

Principal Place of Business	Mailing Address
1241 HARRISON STREET HOLLYWOOD FL 33019	1241 HARRISON STREET HOLLYWOOD FL 33019

3. Date Incorporated or Qualified: **07/11/1995** | 3a. Date of Last Report: –

4. FEI Number: 65-0593709 | ☐ 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	2a. Mailing Address
21	26
22 Street, Apt. #, etc.	27 Street, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

LUSTIG, HERMAN
1241 HARRISON STREET
HOLLYWOOD FL 33019

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0202 and 607.1635, 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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	1 TITLE	☐ Change ☐ Addition
NAME	GABRIELE SUNDORF	2 NAME	
STREET ADDRESS	9221 E. BAY HBR DR	3 STREET ADDRESS	
CITY-ST-ZIP	BAY HARBOR ISLAND FL 33154	4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT ☐ DELETE	2 TITLE	☐ Change ☐ Addition
NAME	HERMAN LUSTIG	2 NAME	
STREET ADDRESS	1241 HARRISON ST	2 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33019	2 CITY-ST-ZIP	
TITLE ☐ DELETE		3 TITLE	☐ Change ☐ Addition
NAME		3 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		3 CITY-ST-ZIP	
TITLE ☐ DELETE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE ☐ DELETE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE ☐ DELETE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

14. I (We) 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)(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.

SIGNATURE: _____ HERMAN LUSTIG 2/1/96 954-9272922

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

CR2E034 (12/95)