File Now. Filing Fee after May 1 is ~~$250.00~~

FILED
May 28 1998 8:00am
Secretary of State

CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation DOCUMENT # ~~P96000045284~~

TRANSNATIONAL ENGINEERING ADVISORY SERVICES, INC
823 RAVENS CIRCLE APT. 102
ALTAMONTE SPRINGS, FL. 32714

P96000095284

If above mailing address is incorrect in any way, line out incorrect information and enter correction in Block 2.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/21/1996
3a. Date of Last Report:
4. FEI Number: 59-3412731
Applied For / Not Applicable

FILING FEE $200.00

ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status [ ] — $138.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: [ ] Yes [X] No

2. Mailing Address
21 823 RAVENS CIRCLE
Suite, Apt. #, etc.
22 102
City & State
23 ALTAMONTE SPRINGS, FL.
Zip 24 32714 Country 25 SEMINOLE

2a. Principle Place of Business
26 823 RAVENS CIRCLE
Suite, Apt. #, etc.
27 102
City & State
28 ALTAMONTE SPRINGS, FL.
Zip 29 32714 Country 30 SEMINOLE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: ANN FORTE PALUMBO
82 Street Address (P.O. Box Number is Not Acceptable): 7480 WOODBURN CR.
83
84 City: WINTER PK FL 85 Zip Code: 32792 86 Country: ORANGE

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 Ana Forte (Registered Agent (Accepting Appointment)) DATE 4/27/98

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS CHANGES	
1.1 TITLE	PSD ~~DELETE~~	1.1 TITLE	ANA FORTE PALUMBO PSD
1.2 NAME	ALCOCK, ROBERT P.	1.2 NAME	
1.3 ADDRESS	1401 ALOMA AVENUE, SUITE 87	1.3 ADDRESS	7480 WOODBURN CR.
1.4 CITY ST ZIP	WINTER PK, FL. 32792	1.4 CITY ST ZIP	WINTER PK, FL. 32792
2.1 TITLE		2.1 TITLE	
2.2 NAME		2.2 NAME	
2.3 ADDRESS		2.3 ADDRESS	
2.4 CITY ST ZIP		2.4 CITY ST ZIP	
3.1 TITLE		3.1 TITLE	
3.2 NAME		3.2 NAME	
3.3 ADDRESS		3.3 ADDRESS	
3.4 CITY ST ZIP		3.4 CITY ST ZIP	
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 ADDRESS		4.3 ADDRESS	
4.4 CITY ST ZIP		4.4 CITY ST ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	100002541101
5.3 ADDRESS		5.3 ADDRESS	-05/29/98--01084--017
5.4 CITY ST ZIP		5.4 CITY ST ZIP	***150.00
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 ADDRESS		6.3 ADDRESS	
6.4 CITY ST ZIP		6.4 CITY ST ZIP	

5-28 JR

14. I 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; I further certify 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or 13 above, or on an attachment with an address.

SIGNATURE Ana Forte DATE 4/27/98

CR2E034 (11/92)