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 #
1. Corporation Name P97000056883 (6)

TRANS MANA TRADING COMPANY

Jun 05 1998 8:00am Secretary of State

Principal Plac 10272 HARBO CORAL SPRIN		Mailing Address 10272 HARBOR INN #3: CORAL SPRINGS FL 33		DO NOT WRITE IN THIS 3. Date incorporated or Qualified	10 BIJBI	
				06/27/1997		
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apl.	# alc	Suite, Apt #, etc.		45-07877Z7	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country	7 ₍₁₎	Country	8. This corporation owes or has paid the cu	Added to Fees	
24		29	30		Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent	
	N DE LIER, JUAN M		81 Name	Machada Marcas		
7908 SW 9TH STREET NORTH LAUDERDALE FL 33068			82 Street Add	MAYCO Street (P.O. Box Number is Not Acceptable)		
				10982 HARbor INN #-32.		
			83			
			84 City	ral Spaines El	85 Zip Code	
11, Pursuant	to the provisions of Sections 607.0502	and 607.1608, Florida Statu	les, the above-named corp	poration submits this statement for the purpose o	f changing its registered	
office or r agent. I a	e giste red agont, or both, in the State o im fam iliar withyand accept the obli d a	of Florida. Such change was tions. 6. Section 607,0505. Fi	authorized by the corpora orida Statutes	ilion's board of directors. I hereby accept the app	pointment as registered	
SIGNATURE	I d'ann de	Wachen In	Mare	es Machado Pres		
SIGNATURE	Signature typed or preded dame of regular a age of	/	E Registered Agent signature requ	red wheri re-instating) DATE		
12,	OFFICERS AND	the second of th	13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	D MACHADO MADOOC	L DELETE	11 TITLE		☐ Change ☐ Addition	
NAME	MACHADO, MARCOS		1 2 NAME			
STREET ADDRESS	10272 HARBOR INN #32 CORAL SPRINGS FL 33071		1.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	CONAL SPRINGS PL 330/1	DELETE	1.4 CITY - ST - ZIP			
1 1		L DECETE	21 THLE		Change Addition	
NAME OZOSSZ ADDOSOG			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY- \$1-7iP 3.1 TITLE		Change Addition	
NAME		LJ MICIE			C custific C wontrols	
STREET ADDRESS			3.2 NAME			
CITY-ST-ZIP			3.3 STREET ADDRESS			
TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 HTLE		Change Addition	
NAME			4. 2 NAME		C Ollarido C Madition	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 Title		Change Addition	
NAME			5 2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY- ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			62 NAME	90000255029	33 17 1.7 1	
STREET ADDRESS			63 STREET ADDRESS	-06/08/980100704	5 'Q[5	
CITY ST. 7IP			CACITY OF 71D	***150.00	· '	

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1197(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 of the receiver of 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.