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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000088362 (3)

TRANS CONTINENTAL MANAGEMENT, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address		E YARKINDA KIS TRAK IRAN BAKA RATIH AKAN DAKAN ISAN INDIRA (UMA BANA IRAN
7380 SAND LAKE ROAD STE 350		7380 SAND LA	7380 SAND LAKE ROAD STE 350		
ORLANDO FL 32619		ORLANDO FL	ORLANDO FL 32819		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					10/13/1997
2. Principal Pi	lace of Business	2a. Mailing Addr	ess		4. FEI Number Applied For
21		— ·	26		59-3492637 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.		CO TE Audus
22		27			6. Certificate of Status Desired Fee Required
City & State	9	City & State			Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Co	ountry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes X No
		of Current Registered Agent		81 Name	10. Name and Address of New Registered Agent
PRINGLE, WILLIAM B NI				81 Nam	
7380 SAND LAKE ROAD STE 350				82 Stree	t Address (P.O. Box Number is Not Acceptable)
OF	RLANDO FL 32819			83	
				63	
				84 City	85 Zip Code
ļ.,		207 05/00 - 1 202 4500 51		<u> </u>	FL FL FL FL FL FL FL FL
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.					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature typed or present area of registered agent and little if applicable (NOTE Registered Agent agent agent and little if applicable DATE					
12. OF FICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DE		TITLE	Change Addition
NAME	PEARLMAN, LOUIS J	J		NAME	_ , _
STREET ADDRESS	7380 SAND LAKE RO		1.3 5	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32819)	1.4 0	CITY - ST - ZIP	
TITLE	D	DE DE		TITLE	Change Addition
NAME	FISCHETTI, ROBERT	Ť	2.21	NAME	
STREET ADDRESS	7380 SAND LAKE RO	OAD STE 350	2.3 5	STREET ADDRESS	
CITY+ST-ZIP	ORLANDO FL 32819)	2.4	CITY-ST-ZIP	
TITLE		□ DE	LETE 3.1 T	TITLE	Change Addition
NAME			3.21	NAME	
STREET ADDRESS			3.3 9	STREET ADDRESS	
CITY-ST-ZIP				CITY - ST - ZIP	
TITLE		□ DE	LETE 4.1 T	TITLE	☐ Change ☐ Addition
NAME			4.2	NAME	
STREET ADDRESS			4.3.5	STREET ADDRESS	1
CITY+ST-ZIP		······································		CITY-ST-ZIP	
TITLE		□ D€		TITLE	Change Addition
NAME				NAME	
STREET ADDRESS			5.3 9	STREET ADORESS	
CITY-ST-ZIP				CITY-ST-ZIP	
1Ur£		☐ DE		TITLE	Change Addition
NAME			6.2 M	NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP			6.40	CITY-ST-ZIP	

I 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the receive Block 12 or Block 13 if changed, or on an anachr