## 2001-UNIFORM BUSINESS REPORT (UBR)

CITY-ST-ZIP MIAMIF FL 33150-3506  CITY-ST-ZIP   MIAMIF FL 33150-3506  CITY-ST-ZIP   DRV   D ALT MAN   Change   Addition   RAME   STREET ADDRESS   CITY-ST-ZIP   CITY-ST-ZI	DOCUMENT # P980000	015286	02-20-2001 90046 008 *****50.00 <b>P98</b> 00001 5286		
2. Principal Place of Business Suite, Apr. II., etc.  Suite, Apr. II., etc.  Suite, Apr. II., etc.  City & Size   Do Not write in this space  City & Size   Do Not write in this space  City & Size   Do Not write in this space  City & Size   Do Not write in this space  City & Size   Do Not write in this space  City & Size   Do Not write in this space  Applied For   Do Not write in this space  City & Size   Do Not write in this space  Back   Do Not write in this space  Applied For   Do Not write in this space  Applied For   Do Not write in this space  Back   Do Not write in this space  Applied For   Do Not write in this space  Back   Do Not write i	TRAN CONSTRUCTION, INC.		01 MAR 20 PM 3: 39		
Subs. Apt. 6. etc.  Subs.	150 NORTHWEST 70RD STREET	-160 NORTHWEST 75RD STREE		SECRETARY OF STATE TALLAHASSEE. FLORIDA	
Name and Address of Current Registered Agent   See County   See County   See Required   See Re	420 LINCOLN RD.	420 LINCO	OLK RD	<del></del>	
6. Name and Address of Current Registered Agent  1. LOUDEN, HENRY T. LOUDEN  1. Street Agents of the State of Policy Process of Changing its registered office or registered agent, or both, in the State of Florida.  2. Street Agents of Policy Process of Changing its registered office or registered agent, or both, in the State of Florida.  3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  3. This corporation is eligible to satisfy its intemptic Tax filling requirement and elects to do so.  (See cineria or back)  4. This corporation is eligible to satisfy its intemptic Tax filling requirement and elects to do so.  (See cineria or back)  5. OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  THE UNME UNDER TAX Filling Tax filling requirement and elects to do so.  13. The STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  14. OFFICERS AND DIRECTORS  15. OFFICERS AND DIRECTORS  16. The STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  17. OFFICERS AND DIRECTORS  18. The ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  18. OFFICERS AND DIRECTORS TO THE TAX FIRST ADDITIONS CHANGES TO OFFICERS ADDITIONS CHANGES T	MIAMI BEACH, FL	MIMMI BEAC	<del> ,</del>	Not Applicable	
LOUDEN, HENRY T  150 NORTHWEST 758D STREET  MIAMIH FL 30150-0506  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.    Chy	35/39 VSA	33/39	VSA	5. Certificate of Status Desired Fee Required	
LOUDEN, HENRY T JARD STREET    Street Address (P.D. Do Number is Not Acceptable)	6. Name and Address of Current F	Registered Agent	Name //	* diameters	
### PRICE   Delete					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.    Signature   Signa			420	CINCOLN RD.	
SIGNATURE    Spanier page or printed name of real purples of the strainglible   Spanier page of the strainglible   Spanie		ı N	City MI	AMI BEACH FL 33/39	
SIGNATURE Synature, typed or printed name of registral production.  9. This corporation is eligible to salistly its intangible Tax filing requirement and elects to do so. (See criteria on back)  11. OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  10. LOUDEN, HENRY T  STREET ADDRESS  CITY-ST-2P  TITLE  10. Delete  11. Delete  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  13. SO NORTHWEST TORING	8. The above named entity submits this statement or	the purpose of changing its regi	istered office or regi	istered agent, or both, in the State of Florida.	
Tax filing requirement and elects to do so.  (See criteria on back)   After MAY 1, 2001 Fee will be \$550.00   Trust Fund Contribution.  (See criteria on back)   Debete   Trust Fund Contribution.  Trust Fund Contribution.  Added to Fees		HENR nd litie it applicable. (NOTE: Rec	7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	2 7 / 2 3/ 2 3/ 2 3/ 2	)
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13. 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 report or supplemental report since and activate 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 employered to accuse this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all their like empowered.	13. I hereby certify that the information supplied with I indicated on this report or supplemental report of the corporation or the receiver or trustee en row changed, or on an attachment with an address, with the corporation of the receiver or trustee en row changed.	is filing does not qualify for the frue and accurate and that my signered to fecule this report as rethell the movered.	exemption stated in gnature shall have the equired by Chapter 6	Section 119.07(3)(i), Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if	
SIGNATURE: HOVEY T. LOVDEN 1/30/01 315 673 5727	SIGNATURE:	// HENRY	T. LOV.	DEN 1/30/01 315 6735427	

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