## **2003 FOR PROFIT CORPORATION**

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)				FILED Aug 14, 2003 8:00 am Secretary of State		
DOCU	MENT # <b>P990</b> (	00023261		08-14-2003 90071 04	9 ***150.00	
1. Entity Nam TRANSLA	e	9		2	, 100.00	
Principal Place of Business . Mailing Address 2200 LAKE DRIVE 2200 LAKE DRIVE DELRAY BEACH FL 33444 DELRAY BEACH FL 33444			4		71888 13118 41818 81181 1581 1881	
2. Principal P	Place of Business	3. Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.	☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 65-0909482	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
- +	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered	Agent	
RENTOUMIS, MICHAEL 2200 LAKE DRIVE			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
DELRAY BEACH FL 33444						
•			City	FL	Zip Code	
	named entity submits this statement fi ions of registered agent.	or the purpose of changing its	registered office or regi	stered agent, or both, in the State of Florida. I am	familiar with, and accept	
₹						
SIGNATORE .	Signature, typed or printed name of registered agen	and title if applicable. (NOTI	E: Registered Agent signature req	uired when reinstating) DATE		
After Se	ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$75 c Payable to Florida Department c			Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11	
TITLE NAME STREET ADDRESS	P   RENTOUMIS, MICHAEL   2200 LAKE DR.	☐ Delete	TITLE NAME STREET ADDRESS		Change Addition	
CITY-ST-ZIP	DELRAY BEACH FL 33444		CITY-ST-ZIP			
TITLE NAME STREET ADDRESS	O RENTOUMIS, CHER 2200 LAKE DR.	☐ Delete	TITLE NAME STREET ADDRESS		Change Addition	
CITY-ST-ZIP	DELRAY BEACH FL 33444		CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- 🗀 · Delete:	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	Change Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	
CITY-ST-ZIP		Delete	CITY-ST-ZIP	<del> </del>	☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	·		
TITLE NAME STREET ADDRESS		☐ Delete	TITLE  NAME  STREET ADDRESS		☐ Change ☐ Addition	

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

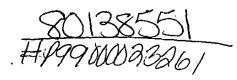
CITY-ST-ZIP

MICHAEL

Daytime Phone #







2200 Lake Drive Delray Beach, Florida 33444 Phone: 1-561-276-7753 Fax: 1-561-243-8852

August 11, 2003

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

Dear Sirs,

I hereby request a waiver of the late fee due to the non-receipt of prior notice. Enclosed please find the completed report and check for \$150.00.

Thank you in advance for your prompt attention to this matter.

Sincerely,

Michael Rentoumis

President