04-13-2005 90085 001 *** 450.00 P99000037883

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000037883						FILED			
1. Entity Name TRANSATLANTIC HOLDING CORP.						05 A	PR 21	AM 10:	42
Principal Place	of Business		Mailing Address		اناد ا	ILIART	OF ST	ATE	
48 E FLAGLER STREET			48 E FLAGLER STREET			TALL.	AHASSE	E, FLO	RIDA
4TH FLOOR MIAMI, FL 33131			4TH FLOOR MIAMI, FL 33131						
2. Principal Place of Business			3. Mailing Address						
a. Thirdpart lace of observes							AF 18103 HIJU 1983	i 1912 1918 18	881 HUU
Suite, Apl. #, etc.			Suite, Apt. 4, etc.			02032005 Chg-P	CR2E03	4 (10/03)	
City & State			City & State			4. FEI Number 65-1086569			plied For Applicable
Zip		Country	Zip	Cour	ılry	5. Certificate of Status Desired		8.75 Add	tional
	6. Name	and Address of Current	Registered Agent	<u> </u>	Γ	7. Name and Address of New F		ee Required gent	<u>'</u>
TRANSATLANTIC BANK HOLDING CORP.					Name Robert Moskovitz				
48 E. FLAC	GLER ST	ANK HOLDING COL			Street Address (P.O. Box Number is Not Acceptable) 48 East' Flagler St				
MIAMI, FL	33131	,	٠.		761.1	asi tragiter at	··-		
					City Miam	1	FL	33°3	
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. I am familiar with, and									
the obligations of registered agent.									
SIGNATURE KO POINT MOS KO VITZ 4/2 / 0.5 Software transport provided very for large-larged appert and title of applicable. (NOTE: Registered Appert algorithms required when remotating) CATE									
FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5,00 May Be After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees								,	
10.	D	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFF			
TITLE	D DE ESCARGEDO, MARCOS			TIT. NAM				☐ Change	Addition
STREET ADDRESS 48 E FLAGLER STREET 4TH FL CITY-ST-ZP MIAMI, FL 33131			OOR		EET AODRESS (-ST-ZIP				
DILLE	WILESTER, T	- 33131	☐ Delete	12PL				Change	Addition
NAME	ĺ			HAN	1			_ •	
STREET ADDRESS CITY-ST-ZIP					EET AOORESS (-ST-ZIP				
TITLE			☐ Delete	nn				Change	Addition
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CITY-ST-ZIP		_ 	<u> </u>	cm	(-ST-ZIP	•	· · · · · · · · · · · · · · · · · · ·		
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HANE			C telds	HAA	4E	\	LAU	Tot	C ALGRED
STREET ACORESS CITY-ST-ZIP					eet adoress Y-ST-ZIP	($\mathcal{D}_{C^{1}}$	NO]
TITLE			☐ Delete	πħ	.E			Change	Addition
NAME STREET ADDRESS]_		•	MAA	AE EET ADORESS				
CITY-ST-ZIP		,		1	1-SI-ZIP			• •	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes 1 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 frustee 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 the appears of the corporation or an attachment with all other like empowered.									
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SIGNATURE: SIGNATURE: SIGNATURE MIG TYPED OF PRINTED NAME OF SIGNING OFFICER OR CHRECTOR Dard Daylors Provis *									