

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

FILED  
Feb 04 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S82030 (5)  
1. Corporation Name  
TRANSNATIONAL PROPERTIES, INC.



Principal Place of Business Mailing Address  
~~C/O ANDY GRUBER~~  
800-7187-07... #527  
MIAMI BEACH FL 33141  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For  
21 3925 COLLINS AVE 26 3925 COLLINS AVE 65-0301866 Not Applicable  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 City & State 27 City & State 5. Certificate of Status Desired  \$8.75 Additional Fee Required  
23 MIAMI BEACH - FL 28 MIAMI BEACH - FL 6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
24 33140 25 USA 29 33140 30 USA 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  
SHIMOFF, IRVING  
200 S. BISCAYNE BLVD.  
SUITE 1050  
MIAMI FL 33130

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code 33131

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<del>BP</del> <input type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRUBER, ANDY	1.2 NAME	GRUBER, ANDY A.
STREET ADDRESS	<del>800-7187-07... SUITE 527</del>	1.3 STREET ADDRESS	3925 COLLINS AVE.
CITY-ST-ZIP	MIAMI BEACH FL	1.4 CITY-ST-ZIP	MIAMI BEACH - FL - 33140
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	BOMENY, CRISTIANE
STREET ADDRESS		2.3 STREET ADDRESS	3925 COLLINS AVE.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI BEACH - FL - 33140
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	BOMENY, CRISTIANE
STREET ADDRESS		3.3 STREET ADDRESS	3925 COLLINS AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI BEACH - FL - 33140
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	GRUBER, ANDY A.
STREET ADDRESS		4.3 STREET ADDRESS	3925 COLLINS AVE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI BEACH - FL - 33140
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 or 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.

SIGNATURE: *Andy A. Gruber* 01/27/98 (305) 531-9610

CR2E034 (10/97)