

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

06-03-2002 09:16:043 \*\*\*158.15

**FILED**

02 JUN 27 AM 9:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # S82030  
1. Entity Name  
Transnational Properties, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 6801 Collins Avenue Suite, Apt. #, etc. Carillon Hotel City & State Miami Beach, Florida Zip 33141		3. Mailing Address 777 Brickell Avenue Suite, Apt. #, etc. Suite 1070 City & State Miami, Florida Zip 33131	
Country USA		Country USA	

4. FEI Number  
65-0301866

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

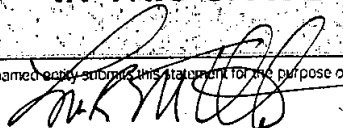
Name  
Louis R. Montello

Street Address (P.O. Box Number is Not Acceptable)  
777 Brickell Avenue, Suite 1070

City  
Miami

FL Zip Code  
33131

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  Louis R. Montello June 26, 2002

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when re-appointing) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

January 1 - May 1, Fee is \$150.00  
After May 1, Fee is \$350.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State.

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D P T S Cristiane Boneny 1413 Sunset Harbor Drive, Apt 604 Miami Beach, Florida 33139	TITLE NAME STREET ADDRESS CITY- ST- ZIP
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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 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 11 or on an attachment with an address, with all other filers empowered.

SIGNATURE  Cristiane Boneny, President 5/29/02 (305) 695-7353

CR2E034B (12/01)