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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000083756 (2)

TERRIER CORPORATION

Principal Place of Business 1801 FAST SUNRISE REVO

Mailing Address

1801 FAST SUNRISE BLVD.

FILED Mar 10 1997 8:00am Secretary of State



FORT LAUDERDALE FL 33304		FORT LAUDERDALE FL 33304-2332							
						3. Date incorporated or Qualified 10/07/1996	3a. Date of l	.ast Re	port
2. Principal P	lace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number		App	olied For
21		26				65-0'/0020	O	Not	Applicable
Suite, Apt	#, etc.	Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	е	City & Sta	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ζφ [4]	Country 25	Zip 29		Country 30	,	This corporation has liability for Florida Statutes	intangible tax ur Yes No		199.032,
	9. Name and Address of Co	-	nt .			10. Name and Address of New Re	gistered Agent		
JOH 790	rdoch, robert e esquir Inson, anselmo, murdo East broward blyd., si Rt Lauderdale fl 33301	CH, BURKE & GEOR	GE	81 82 83	Name Street /	Address (P.O. Box Number is Not Acceptate	ole)		
101	II GIGGENSIAL IL GOVI			84	City		FL 65	Zip C	ode
11. Pursuant office or r	to the provisions of Sections 60 egistered agent, or both, in the militar with, and accept the	7.0502 and 607.1508, Fl State of Florida. Such of obligations of, Section 6	lorida Statute hange was a 07.0505, Flo	es, the above authorized by orida Statute	e-named the corp	corporation submits this statement for the poration's board of directors. I hereby accept	ourpose of chango of the appointme	ging its ent as r	registered egistered
SIGNATURE	Signature specifier printed name of register					required when reinstating)	DATE		
12.		S AND DIRECTORS	(1457)	13.	ant signatoro	ADDITIONS/CHANGES TO OFFIC		CTORS	S IN 12
TITLE	D		DELETE	1.1 TITLE			Cr		Addition
NAME	Terrier, Henri			1.2 NAME					
STREET ADDRESS	1601 EAST SUNRISE BLV	D.		1 3 STREET	ADDRESS				
CHTY-ST-ZIP	FORT LAUDERDALE FL 3	3304		1.4 CiTY-5	ST-ZIP				
TITLE			DELETE	2.1 TITLE			□ Cr	nange	Addition
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS				
CITY-ST-Z-P				2. 4 CITY-	ST-ZIP				
TOF		L	DELETE	3.1 TITLE			CI CI	range	Addition
NAME				3.2 NAME	1				
STREET ADDRESS				3.3 STREE	AODRESS				
CITY-ST-2IP				3.4. CiTY-	ST-ZIP				
TITLE		L.] DELETE	4.1 TITLE			∐ Cr	nange	Addition
NAMŁ				4. 2 NAME	ľ				
STREET ADDRÉSS				ľ	ADDRESS				
CITY - ST - ZIP			DELETE	4.4 CITY-5	ST-ZIP		□ Ct	nango	☐ Addition
THILE		<u>L</u>	1 ntrric	5.1 TATLE			£ U	រជាម្នេច	MO00000
NAME STREET ADDRESS				5.2 NAME	(ADDDCCC	·			
				5.3 STREET					
CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·	DELETE	5.4 CITY-5 6.1 TITLE	si~ZIP	, , , , , , , , , , , , , , , , , , ,	□ c+	hanne	Addition
NAME		L.	,	62 NAME			U 0	Bo	
STREET ADDRESS				6.3 STREET	AUDBree				
CITY ST-7P	L			6.4 CITY - S	21 - ZIP				

14. I do 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 chapter or or an attachor that an address.

SIGNATURE: