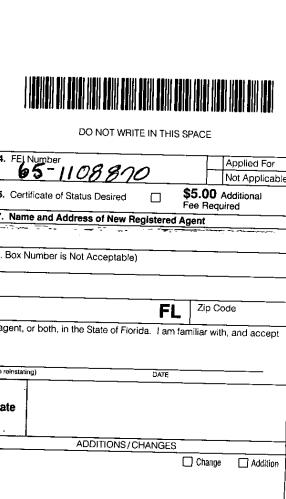
2002 UNIFORM BUSINESS REPORT (UBR)

DO@UMENT # L0100008115 1. Entity Name TERRA INTERNATIONAL DEVELOPMENTS LLC Principal Place of Business Mailing Address

1221 BRICKELL AVE.

FILED Jul 17, 2002 8:00 am Secretary of State 07-17-2002 90140 007 ****50.00



1221 BRICKELL AVE. SUITE 2100 MIAMI FL 33131		1221 BRICKELL AVE. SUITE 2100 MIAMI FL 33131				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEL Number		
Zip	Country	Zip	Country	65 -11088 5. Certificate of Status Desir		Not Applicable Additional
	6. Name and Address of Curr	ent Registered Agent			Fee Req	uired
MARTIN, PEDRO A ESQ. 1221 BRICKELL AVE. SUITE 2100 MIAMI FL 33131			Name Street Address	7. Name and Address of New Registered Agent s (P.O. Box Number is Not Acceptable)		
	•		City		FL Zip C	ode
SIGNATURE	e named entity submits this statemen tions of registered agent. Signature, typed or printed name of registered ag	ent and title if applicable. FILE Make Check	NOTE: Registered Agent signature require NOW!!! FEE IS \$50.00 Payable to Department	ed when reinstating)	of Florida. I am familiar wi	Ih, and accept
9.	MANAGING MEM	BERS/MANAGERS	By September 25, 2002			
TITLE	MGR	Delete	10.	ADDITIO	NS/CHANGES	
NAME, STREET ADDRESS CITY-ST-ZIP	MARTIN, PEDRO A 1221 BRICKELL AVE., SUITE 2 MIAMI FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	e
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- Delete -	- TITLE		☐ Change	- 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	<u>:</u>	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
ITLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition

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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the eccept or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE