

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000044097

**FILED**  
**Jan 18, 2016**  
**Secretary of State**  
**CC8173039734**

**Entity Name:** TERRESSENTIA CORPORATION

**Current Principal Place of Business:**

4100 CAROLINA COMMERCE PARKWAY  
SUITE 102  
NORTH CHARLESTON, SC 29456

**Current Mailing Address:**

3525 IRON HORSE ROAD  
SUITE 104  
LADSON, SC 29456

**FEI Number:** 75-3212038

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            CEO  
Name            HEWLETTE, EARL  
Address        4100 CAROLINA COMMERCE  
                  PARKWAY SUITE 102  
City-State-Zip: NORTH CHARLESTON SC 29456

Title            CFO  
Name            COPELAND, JOHN  
Address        4100 CAROLINA COMMERCE  
                  PARKWAY SUITE 102  
City-State-Zip: NORTH CHARLESTON SC 29456

Title            S  
Name            ALEXANDRE, CARY  
Address        4100 CAROLINA COMMERCE  
                  PARKWAY SUITE 102  
City-State-Zip: NORTH CHARLESTON SC 29456

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** CARY ALEXANDRE

**CORPORATE SECRETAR    01/18/2016**

Electronic Signature of Signing Officer/Director Detail

Date