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

FILED PROFIT Feb 09 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 411982 (2)TERRA EXCAVATING, INC. Principal Place of Business Mailing Address 13400 PINE STREET S.W. 13400 PINE STREET S. W. LARGO FL #1847 33774 LARGO FL 3484 35714 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/01/1972 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1432029 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Sulte, Apt. #. etc. 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 26 Country Żip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FINKE RODNEY R. 13400 PINE STREET ≤ W. 82 Street Address (P.O. Box Number is Not Acceptable) LARGO FL 99544 38770 83 84 City Zip Code 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TDS 1.1 THLE TITLE FINKE, RODNEY 1.2 NAME NAME 3856 MCKAY CREEK DR. 1.3 STREET ADDRESS STREET ADDRESS LARGO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition PD 2.1 TITLE TITLE COLLINS, JAMES F 2.2 NAME NAME 10900 OAKHURST ROAD 2.3 STREET ADDRESS STREET ADDRESS LARGO, FL 00000 2. 4 CITY-SI-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 3.1 TITLE TITLE WHITE, DAVID C. 3.2 NAME NAME STREET ADDRESS 126 29TH AVE. N. 3.3 STREET ADDRESS **ST. PETERSBURG FL** 3.4. CITY - ST- 2IP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TiTLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(1Y - ST - Z)P DELETE Change Addition TITLE 61 TITLE

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.

6.2 NAME 6.3 STREET ADDRESS

NAME

STREET ADDRESS