

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
Sep 24 1998 8:00am  
Secretary of State

| PROFIT CORPORATION ANNUAL REPORT 1998                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| DOCUMENT # F95000003977<br>1. Corporation Name<br><b>Terrace Holdings, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Principal Place of Business<br>2699 Stirling Road<br>Suite C-405<br>Ft. Lauderdale, FL 33312                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Mailing Address<br>2699 Stirling Road<br>Suite C-405<br>Ft. Lauderdale, FL 33312                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| 2. Principal Place of Business<br>21 1351 N.W. 22nd Street<br>State, Apt. #, etc.<br>22 City & State<br>23 Pompano Beach, FL<br>24 Zip 33069 25 Country U.S.A.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 2a. Mailing Address<br>26 1351 N.W. 22nd Street<br>State, Apt. #, etc.<br>27 City & State<br>28 Pompano Beach, FL<br>29 Zip 33069 30 Country U.S.A.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 3. Date Incorporated or Qualified<br>08/16/95                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 4. FEI Number<br>65-0594270                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 9. Name and Address of Current Registered Agent<br>Dr. Sam Lasko<br>4100 North Hills Drive<br>Hollywood, FL 33021                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | 10. Name and Address of New Registered Agent<br>81 Name William P. Rodrigues, Jr.<br>82 Street Address (P.O. Box Number is Not Acceptable) 1351 N.W. 22nd Street<br>83<br>84 City Pompano Beach FL 85 Zip Code 33069                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| 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.<br>SIGNATURE: <i>[Signature]</i> , William P. Rodrigues, Jr.<br>(NOTE: Registered Agent signature required when constituting)                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 12. OFFICERS AND DIRECTORS<br>12.1 TITLE P/C/S/D <input checked="" type="checkbox"/> DELETE<br>12.2 NAME Dr. Sam Lasko<br>12.3 STREET ADDRESS 4100 N. Hills Dr.<br>12.4 CITY, ST, ZIP Hollywood, FL 33021<br>12.5 TITLE E/V/T/D <input type="checkbox"/> DELETE<br>12.6 NAME Jonathan Lasko<br>12.7 STREET ADDRESS 4100 N. Hills Dr.<br>12.8 CITY, ST, ZIP Hollywood, FL 33021<br>12.9 TITLE <input type="checkbox"/> DELETE<br>12.10 NAME<br>12.11 STREET ADDRESS<br>12.12 CITY, ST, ZIP<br>12.13 TITLE <input type="checkbox"/> DELETE<br>12.14 NAME<br>12.15 STREET ADDRESS<br>12.16 CITY, ST, ZIP<br>12.17 TITLE <input type="checkbox"/> DELETE<br>12.18 NAME<br>12.19 STREET ADDRESS<br>12.20 CITY, ST, ZIP<br>12.21 TITLE <input type="checkbox"/> DELETE<br>12.22 NAME<br>12.23 STREET ADDRESS<br>12.24 CITY, ST, ZIP<br>12.25 TITLE <input type="checkbox"/> DELETE<br>12.26 NAME<br>12.27 STREET ADDRESS<br>12.28 CITY, ST, ZIP<br>12.29 TITLE <input type="checkbox"/> DELETE<br>12.30 NAME<br>12.31 STREET ADDRESS<br>12.32 CITY, ST, ZIP |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12<br>13.1 TITLE P/C/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>13.2 NAME Steven Shulman<br>13.3 STREET ADDRESS 1351 N.W. 22nd Street<br>13.4 CITY, ST, ZIP Pompano Beach, FL 33069<br>13.5 TITLE E/V/S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>13.6 NAME Jonathan S. Lasko<br>13.7 STREET ADDRESS 1351 N.W. 22nd Street<br>13.8 CITY, ST, ZIP Pompano Beach, FL 33069<br>13.9 TITLE T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>13.10 NAME William P. Rodrigues, Jr.<br>13.11 STREET ADDRESS 1351 N.W. 22nd Street<br>13.12 CITY, ST, ZIP Pompano Beach, FL 33069<br>13.13 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>13.14 NAME Richard Power<br>13.15 STREET ADDRESS 1351 N.W. 22nd Street<br>13.16 CITY, ST, ZIP Pompano Beach, FL 33069<br>13.17 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>13.18 NAME Fred A. Seigel<br>13.19 STREET ADDRESS 1351 N. W. 22nd Street<br>13.20 CITY, ST, ZIP Pompano Beach, FL 33069<br>13.21 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>13.22 NAME Houssam T. Aboukhater<br>13.23 STREET ADDRESS 1351 N.W. 22nd Street<br>13.24 CITY, ST, ZIP Pompano Beach, FL 33069 |  |
| 14. I hereby certify that the information applied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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. 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 or is changed or on an attachment with an address.                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| SIGNATURE: Jonathan S. Lasko, Secretary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 954 917-7272                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |

CR2E034 (5/98)