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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J74439

(7)

Mailing Address

TERRA CAPITAL COMPANY, INC.

FILED Apr 14 1998 8:00am Secretary of State



% JONATHAN CAMERON-HAYES -100 N CONGRESS AVE -W PALM DEACH FL COICH US		% JONATHAN CAMERON-HAYES		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/27/1987							
2. Principal Place of Bus 1 2090 Palm Be	ach Lakes Blvd	2a. Mailing Address 26 2090 Pa1m B	Beach	Lal	ces Blvd		FEI Number 65-0004167		Applied For Not Applicable		
Suite, Apt. #. etc. 2 Suite 801	_	Suite, Apt. #, etc. 27 Suite 801			5.	Certificate of Status Desired		.75 Additional ee Required			
City & State West Palm Be	each, FL.	City & State 28 West Palm Beach. FL.				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees					
Zip 4 33409	Country 25	Ζφ 33409	30 Cou	intry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent							
-400 N-GONGRESS AVE -W PALM BEACH FL 83401-			81	Name							
			$\sqcup \bot$	2090 Palm Beach Lakes Blvd.							
			-	Suite 80	uite 801						
					West Pa			L	Zip Code 33409		
11 Pursuant to the provi	sions of Sections 607.0502.	and 607 1508. Florida Statu	nec the al	have-	named cornor	ation	a submits this statement for the nurgose	of chanc	ning 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 ramiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE	TURE Signature, typed or printed name of registered agent and tille it applicable (NDTE Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND DIRECT	13.	S TO OFF	TO OFFICERS AND DIRECTORS IN								
TITLE	DP .	DELETE	1.1 TITLE						Change	☐ Addition		
NAME	RISTOW, LUTZ R.		1.2 NAME									
STREET ADDRESS	400 N CONGRESS AVE		1.3 STREET ADDRESS	2090 Pa	alm E	Beach	Lakes	Blvd.	Suite	801		
CITY-ST-ZIP	-WEST PALM BEACH FL		1.4 CITY-ST-ZIP	West Pa	alm E	Beach,	FL.	3340	9			
TITLE	DVS	DELETE	2.1 TITLE	}					X Change	Addition		
NAME	CAMERON-HAYES, JONATHAN		2.2 NAME	į								
STREET ADDRESS	-400 N CONGRESS AVE		2.3 STREET ADDRESS	2090 Pa	alm H	Beach	Lakes	Blvd.	Suite	801		
CITY-ST-ZIP	- West-Palm Beach Fl		2. 4 CITY - ST - ZIP	West Pa	alm E	Beach,	Flor:	ida 33	409			
TITLE	DVT	DELETE	3.1 TITLE						X Change	Addition		
NAME	MILLER, FRANK		3.2 NAME	l								
STREET ADDRESS	400 N CONGREGE AVE		3.3 STREET ADDRESS	2090 Pa	alm I	Beach	Lakes	Blvd.	Suite	801		
CITY - ST - ZIP	WEGT PALM BEACH FL		3.4. CITY-ST-ZIP	West Pa								
TITLE		DELETE	4.1 TITLE						Change	Addition		
NAME			4. 2 NAME]								
STREET ADDRESS			4.3 STREET ADDRESS									
CITY-ST-ZIP			4.4 CITY-ST-ZIP									
TITLE		☐ DELETE	5.1 TITLE	1	-				☐ Change	Addition		
NAME			5.2 NAME	ĺ								
STREET ADDRESS			5.3 STREET ADDRESS]								
CITY-ST-ZIP			5.4 CITY - ST - ZIP									
TITLE		☐ DELETE	61 TITLE						Change	Addition		
NAME			6.2 NAME	ĺ								
STREET ADDRESS			6.3 STREET ADDRESS	1								
CMY-ST-ZIP			6.4 CHY-ST-ZIP									

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 supplymental indual 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 the attachment with an address.

SIGNATURE: X BIGNATURE A

3-30-98