

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mormann
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

55 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K60900

(3)

1. Corporation Name

TERRACAN FLORIDA CORPORATION

Principal Place of Business

C/O CANTRELL WEAVER BURGESS
580 VILLAGE BLVD SUITE 330
WEST PALM BEACH FL 33409

Mailing Address

C/O CANTRELL WEAVER BURGESS
580 VILLAGE BLVD SUITE 330
WEST PALM BEACH FL 33409

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/25/1989

3a. Date of Last Report

08/16/1994

4. FEI Number

65-0095620

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 195.032
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. *Burgess & Company, Inc.*

2a. Mailing Address

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BURGESS, ROBERT C.
580 VILLAGE BLVD
SUITE 150
WEST PALM BEACH FL 33409

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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

Signature, typed or printed name of registered agent and the # is acceptable

(NOTE: Registered Agent signature required after registration)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	ROTENBER, BARRY
STREET ADDRESS	36 TORONTO ST. #1200
CITY - ST - ZIP	ONTARIO, CANADA
TITLE	DST
NAME	WOLF, ROBERT
STREET ADDRESS	36 TORONTO ST. #1200
CITY - ST - ZIP	ONTARIO, CANADA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	1300-2 FIRST CANADIAN PLACE
1.4 CITY - ST - ZIP	TORONTO ONT CANADA M5X 1E3
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	1300-2 FIRST CANADIAN PLACE
2.4 CITY - ST - ZIP	TORONTO ONT CANADA M5X 1E3
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95

(4/16) 866-3198