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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # L50073**

TERRA FIRMA REAL ESTATE, INC.

5757 LA GORCE DRIVE

Mailing Address Principal Place of Business 1205 LINCOLN ROAD 1205 LINCOLN ROAD SUITE #218 **SUITE #218** DO NOT WRITE IN THIS SPACE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 3. Date Incorporated or Qualifed 02/15/1990 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0173964 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 8. This corporation owes the current year Intangible Country Zip Zip ☐ Yes Personal Property Tax. 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KORUS, MITCHELL PAUL Street Address (P.O. Box Number is Not Acceptable) 1205 LINCOLN ROAD 83 **SUITE #218** MIAMI BEACH FL 33139 85 Zip Code 84 City 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 title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. □ DELETE 1.1 TITLE TITLE 12 NAME KORUS, MITCHELL PAUL NAME 1.3 STREET ADDRESS

MIAMI BEACH FL 33140 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 2.1 TITLE TITLE 2.2 NAME SIKES, JR., JAMES NAME 2.3 STREET ADDRESS 1150 COLLINS AVENUE #201 STREET ADDRESS MIAMI BEACH FL 33140 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME BENWARE, MARK NAME 3.3 STREET ADDRESS 1150 COLLINS AVENUE #201 STREET ADDRES MIAMI BEACH FL 33140 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition 6.1 TITLE DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 we receiver or trystee 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 by on the receiver of the corporation of the corpor

SIGNATURE:

STREET ADDRESS

INTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Jan 22, 1999 8:00am

**Secretary of State** 

01-22-1999 90006 011 \*\*\*150.00

12/31/98 305 531-2888

(11/98)CR2E034