2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

CXTY - ST - 78P

SIGNATURE:

Feb 04, 2004 08:00 AM DOCUMENT # P28656 **Secretary of State** 1. Entity Name TERRATEC, INC. Principal Place of Business Mailing Address 14918 SW 104 ST 14918 SW 104 ST UNIT 37 MIAMI FL 33196 US UNIT 37 MIAMI FL 33196 Mailing Address 2. Principal Place of Business Suite, Apt. #, etc Suite, Apt #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 65-0173627 Not Applicable Country Zio Country \$8.75 Additional \mathbf{z} 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-0000 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent and little if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change Addition Delete TITLE nne U00000034152 02/05/04-80072-006 158.75 PANIAGUA, JOSE GUILLERMO NARAF MARIE STREET ADDRESS STREET ADDRESS 14918 SW 104 ST, UNIT 37 CITY-ST-ZIP GITY - ST- ZIP MIAMI FL Change Addition STD HILE 7371 F ☐ Detete PANIAGUA, MARITZA NAME NAME 14918 SW 104 ST, UNIT 37 STREET ADDRESS STREET ADDRESS CITY+ST-ZIP MIAMI FL CITY - ST - ZIP Change Addition Delete TITLE TITLE NIABAE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CRTY-ST-ZRP ☐ Change ☐ Delete IMF Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE ☐ Detete 3116 F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition THIS NAME NAME STREET ADDRESS STREET ADDRESS CITY-SY-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

FILED