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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

P9400000524 (6) DOCUMENT #

TERRA STAR HOMES INC.

Principal Place of Business

Mailing Address

FILED Feb 04 1997 8:00am Secretary of State



3363 MISSION LAKE DR. UNIT 382 ORLANDO FL 32818-5124		160 NORTH ST. BUFFALO NY 14201-1525							
					3. Date Incorporated or Qualified 01/04/1994	3a. Date of 01/23/1		port	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		App	lied For	
21		26			59-3227301			Applicable	
Suite, Apt #, etc 22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State	28		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Z(p)	Country 25	Ζφ 29]	Countr 30	у	This corporation has liability for in Florida Statutes	ntangible tax ui Yes 🔲 No		199.032,	
		f Current Registered Agent			10. Name and Address of New Reg	istered Agent	!		
	TAGLIN, GEORGE		8.	l Name					
	3 MISSION LAKE DR.		8:	Street Add	ross (P.O. Box Number is Not Acceptable	e)	~		
	T 382		_		and the second s				
ORL	ANDO FL 32818-5124		83	3	•				
			84	ي أ	*	FL 85			
11. Pursuant	to the provisions of Sections	607 0502 and 607.1508, Florida Statute	es, the abo	e-named corp	poration submits this statement for the pition's board of directors. I hereby accep	urpose of chan	ging its	registered	
office or r agent 1 a	registered agent, or both, hi im familiar with, and accuse t	ine State of Florida. Such change was a Me obligations of, Section 607.0505, Flo	sutnorized t orida Statute	sy the corpora es.	tion's board of directors. I hereby accep	tine appointm	entersre ∕	agistereu	
SIGNATURE	1	Cauca-				1/24/	97		
DIGITATIONE.	Signature typed or protect game of se			gent signature requi	ired when reinslating)	DATE			
12.	OFFIC L PC	ERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC				
TOCE .	MANIAS, GILES P.	☐ DELETE	1.1 TITLE	-		L1 C	hange	Addition	
NAME	160 NORTH ST		1.2 NAME						
STREET ADDRESS	BUFFALO NY 14201			T ADDRESS					
CITY-ST-ZiF	DUFFALO IN 14201	1-4		ST-ZIP		17.	hange	Addition	
TOTLE	DELETE		2.1 TITLE]		□ •	nanye	Modition	
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NAME			3.2 NAME						
STREET ADDRESS			1	T ADDRESS					
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STREET ADDRESS				ET ADDRESS					
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NAME			62 NAMI			<u> </u>		.	
STREET ADDRESS				ET ADDRESS					
CITY-SI-ZI2			6.4 CHTY						
51 L.	1			<u> </u>					

14. I do 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 acquait report of 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 changes, or on an attachment with an address.

SIGNATURE: