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 # P94000022664

TERRA VISTA DEVELOPMENT CORP.							1 280 4 28 1 21 0 1812 1814 1814 1		1 4 11814 11818 81118 1	ERIH DIST I da i
Principal Place of Business Mailing Address							t idikildaj ira farti didir i	18(11 961)) ABIN SON)	
1384 HERITAGE ACRES BLVD 1269 US 1										
ROCKLEDGE FL	. 32955	ROCKLEDGE FL 32955				DO NOT WRITE IN THIS SPACE				
US		US				ŀ	3. Date Incorporated or Qui			
							03/23/1994			
2. Principal Pl	ace of Business	2a. Mailing Address					4. FEI Number		Apr	lied For
21 1260		26					59-3304214		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certifcate of Status Desir	red 🛚	\$8.75 A	
22 2		27					5. Certificate of Status Desi	ed 🗅	Fee Rec	quired
City & State	Kledge FL	City & State					Election Campaign Finar Trust Fund Contribution	ncing	\$5.00 M Added to	
Zip	Country	Zip	Cou	ntry			8. This corporation owes th	e current year l		
24 5 04	155 25 USA	29 30	<u>) </u>	·			Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent		81	NI		10. Name and Address of	lew Registered	d Agent	
RAHAL, NICK N					Name					
1269 US 1				82	Street	Address	s (P.O. Box Number is Not A	cceptable)		
ROCKLEDGE FL 32955				83						
100	NELDGE 1 E 02000			03						
				84	City		, 7	F	L 85 Zip C	
11. Pursuant office or re agent. I at SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State of manufacture of the pulling in Signature, typed or printed name of registered agent a	1/001					ation submits this statement for submits the statement of submits the submits the statement of submits the statement of submits the statement of submits the sub	or the purpose of accept the appropriate of the appropriate of the accept the appropriate of the accept the acceptance of the acceptance	of changing its rointment as reg	registered istered
12.	OFFICERS AND	<u>''</u>	13.	- igo	(signolard)	roquirou m	ADDITIONS/CHANGES T		AND DIRECTOR	RS IN 12
TITLE				ΓLE					☐ Change	☐ Addition
NAME	RAHAL, NICK N	1.2		1.2 NAME						
STREET ADDRESS			1.3 ST	REET	ADDRESS					
CITY-ST-ZIP			1.4 CIT	1.4 CITY-ST-ZIP						
TITLE	DVS	☐ DELETE 2.11		TLE					Change	☐ Addition
NAME	BAR-NAVON, BOAZ	R-NAVON, BOAZ		ME						
STREET ADDRESS	1384 HERITAGE ACRES BLVD, SUITE A 23		2.3 ST	2.3 STREET ADDRESS						
CITY-ST-ZIP	ROCKLEDGE FL 32955	LEDGE FL 32955 2.4		2. 4 CITY-ST-ZIP						
TITLE		☐ DELETE	3.1 TIT	1 TITLE					☐ Chaпge	☐ Addition
NAME			3.2 NAMI							
STREET ADDRESS	3.33		3.3 ST	3.3 STREET ADDRESS						
CITY-ST-ZIP			3.4. CI	3.4. CITY-ST-ZIP		<u> </u>				
TITLE	☐ DELETE 4.11		4.1 TIT	4.1 TITLE					Change	☐ Addition
NAME	4.2		4. 2 N	4. 2 NAME						
STREET ADDRESS 4.3 S			4.3 ST	REET	ADDRESS					
CITY-ST-ZIP			4.4 CI		-ZIP	<u> </u>				
TITLE		□ DELETE	5.1 Tf						☐ Change	☐ Addition
LIANE I			5.2 NA	NME.		1				}

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 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 attachangent with an address, with an other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE: 4

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90065 006 ***150.00

Change

Addition