2008 FOR PROFIT CORPORATION

FILED Jan 09, 2008 08:00 AN Secretary of State **ANNUAL REPORT DOCUMENT # P94000022664** 1. Entity Name TERRA VISTA DEVELOPMENT CORP. Principal Place of Business Mailing Address 1269 US 1 1269 US 1 ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32955 No Chg-P CR2E034 (11/05) 01032008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3304214 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAHAL, NICK N DO NOT WRITE 1269 US 1 ROCKLEDGE, FL 32955 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) . . DATE n ; 21 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS U00000776213 DPT TITLE 01/09/08-80075-012 150.00 NAME RAHAL, NICK N 1384 HERITAGE ACRES BLVD, SUITE A STREET ADDRESS ROCKLEDGE, FL 32955 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 spirit perrequired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Date