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

PROFIT CORPORATION ANNUAL REPORT

1998

Block 12 or Block 13 if cha



FLORIDA DEPARTMENT OF STATE Sandra B. Mortkam

FILED

Apr 10 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000022391 (1)

TERRA LINDA LANDHOLDERS, INC.

Principal Place of Business Mailing Address 11800 NW 10 AVE 11800 NW 10 AVE MIAMI FL 33169 MIAMI FL 33169 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/12/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0756214 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Žφ Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BORRERO, JOHN 11800 NW 10 AVE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33169** 83 84 Zip Code 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change Addition TITLE PD 1.1 TITLE **BORRERO, JOHN** NAME 1.2 NAME CR2E034 11800 NW 10 AVE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33169** CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE Change Addition TITLE VD. 2.1 TITLE BORRERO, VINCENT NAME 2.2 NAME 11800 NW 10 AVE STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33169** 2. 4 CITY - ST- ZIP CITY-ST-ZIP DELETE ___ Change 3.1 TITLE Addition TITLE BORRERO, EDWIN STREET ADDRESS 11800 NW 10 AVE 3.3 STREET ADDRESS **MIAMI FL 33169** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP ___ Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 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

at with an address.