

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

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90068 004 ***150.00

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DOCUMENT # P97000046710

1. Corporation Name

TERRA CAPE CONSULTING, INC.

Principal Place of Business

144 SW 38TH TERRACE
CAPE CORAL FL 33914

Mailing Address

144 SW 38TH TERRACE
CAPE CORAL FL 33914

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/01/1997

4. FEI Number

APPLIED FOR 65-0802018

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GLATSCHKE, DIETRICH
144 SW 38TH TERRACE
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME GLATSCHKE, DIETRICH
STREET ADDRESS HALLESCHKE STRASSE
CITY-ST-ZIP GERMANY

TITLE D ☒ DELETE
NAME GLATSCHKE, DIRK
STREET ADDRESS HALLESCHKE STRASSE
CITY-ST-ZIP GERMANY

TITLE D ☒ DELETE
NAME GLATSCHKE, INGE
STREET ADDRESS HALLESCHKE STRASSE
CITY-ST-ZIP GERMANY

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME GLATSCHKE, DIETRICH
1.3 STREET ADDRESS ORTFELD 24
1.4 CITY-ST-ZIP 27299 LANGWEDEL, GERMANY

2.1 TITLE D ☒ Change ☐ Addition
2.2 NAME GLATSCHKE, DIRK
2.3 STREET ADDRESS ORTFELD 24
2.4 CITY-ST-ZIP 27299 LANGWEDEL, GERMANY

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME GLATSCHKE, INGE
3.3 STREET ADDRESS ORTFELD 24
3.4 CITY-ST-ZIP 27299 LANGWEDEL, GERMANY

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 attachment with an address, with all other like empowered.

SIGNATURE: *Dieterich Glatschke* DIETRICH GLATSCHKE

APRIL 17, 1999 (941) 540-2971

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)