CORPORATION ANNUAL REPORT 2002_./



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF GORPORATIONS

Secretary of State 03-11-2002 90073 041 ***150.00

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M.G.K. TERRA INVESTMENTS, INC. 420360 Principal Place of Business Mailing Address 2800 ISLAND BLVD DO NOT WRITE IN THIS SPACE. **STE 402** 3. Date Incorporated or Qualified 3a. Date of Last Report AVENTURA, FL 33160 05/04/98 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0956172 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired 22 27 Fee Required 6. Election Campaign Financing City & State City & State \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zio Country This corporation has liability for intangible tax under S. 199.032, 24 25 30 Florida Statutes Yes Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CABEZA, MONICA M. 82 Street Address (P.O. Box Number is Not Acceptable) 2800 ISLAND BLVD STE 402 83 AVENTURA, FL 33160 84 City 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) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1. 1 TITLE Change Addition PD NAME 1.2 NAME CABEZA, MONICA STREET ADDRESS 1.3 STREET ADDRESS 2800 ISLAND BLVD STE 402 CITY-ST-ZIP 1.4 CITY-ST-ZIP AVENTURA, FL 33160 TITLE 2.1 TITLE Change Addition NAME 2.2 NAME HOYOS, GERMAN STREET ADDRESS 2.3 STREET ADDRESS 2800 ISLAND BLVD STE 402 CITY-ST-ZIP 2,4 CITY-ST-ZIP AVENTURA, FL 33160 TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST-ZIP TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 5.1 TITLE Change ___ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

6.4 CITY-ST-ZIP

SIGNATURE: >

10 X c INTED NAME OF SIGNING OFFICER OR DIRECTOR

Davtime Phone #