2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State
03-17-2003 90467 042 ***150.00

DOCUMENT # P99000076781

1. Entity Name
TERRA MARE INC.

Principal Place of Business	Mailing Address
128 SEASHORE DRIVE JUPITER, FL 33477	128 SEASHORE DRIVE JUPITER, FL 33477

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0948570** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BUETENS, ERIC D 8966 S.E. BRIDGE ROAD HOBE SOUND, FL 33455	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	S/D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RUF, EGON T		NAME		
STREET ADDRESS	128 SEASHORE DRIVE		STREET ADDRESS		
CITY-ST-ZIP	JUPITER, FL 33477		CITY-ST-ZIP		
TITLE	P/D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RUF, MICHAEL E		NAME		
STREET ADDRESS	51 GLEN EYRIE AVE., APT. # 24		STREET ADDRESS		
CITY-ST-ZIP	SAN JOSE, CA 95125		CITY-ST-ZIP		
TITLE	V/D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RUF, KEVIN F		NAME		
STREET ADDRESS	1021 LINCOLN BLVD., STE 212		STREET ADDRESS		
CITY-ST-ZIP	SANTA MONICA, CA 90403		CITY-ST-ZIP		
TITLE	V/D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RUF, BRIAN T		NAME		
STREET ADDRESS	5494 SHARON LANE		STREET ADDRESS		
CITY-ST-ZIP	SAN JOSE, CA 95124		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (10/02)

12. 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 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 report as required 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 empowered.

SIGNATURE: _____ 3/12/03 561 3853996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #