

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortman  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 APR 20 PM 5:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # K43675

(3)

1. Corporation Name

1044 INVESTMENTS, INC.

Principal Place of Business

1428 BRICKELL AVENUE  
SUITE 208  
MIAMI FL 33131  
US

Mailing Address

1428 BRICKELL AVENUE  
SUITE 208  
MIAMI FL 33131  
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/07/1988

3a. Date of Last Report

06/17/1994

4. FEI Number

65-0106304

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRELLES, ALBERTO N.

9100 S. DADELAND BLVD

#1410

MIAMI FL 33156

999 PONCE DE LEON BLVD

#1000

CORAL GABLES, FL. 33134

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

PT

MALAVE, ADOLFO

1428 BRICKELL AVENUE, S-208

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

D

MALAVE, ADOLFO

1428 BRICKELL AVENUE, S-208

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

VP

MALAVE, ADOLFO

1428 BRICKELL AVENUE, S-208

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

D

MALAVE, ANTONIO

1428 BRICKELL AVENUE, S-208

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

**POWER OF ATTORNEY  
KNOW ALL MEN BY THESE PRESENTS**

That I, Adolfo Malave, as President for 1044 INVESTMENTS, INC. have made, constituted and appointed, and by these presents does make, constitute and appoint ALBERTO N. TRELLES true and lawful attorney for them and in their name, place and stead:

TO EXECUTE ANY AND ALL DOCUMENTS REQUIRED IN ORDER TO COMPLY WITH THE CORPORATION ANNUAL REPORT.

giving and granting unto ALBERTO N. TRELLES said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises as fully, to all intents and purposes, as might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that ALBERTO N. TRELLES said attorney or substitute shall lawfully do or cause to be done by virtue hereof.

In Witness Whereof, We have hereunto set our hands and seals the 7th day of April, 1995.

Sealed and delivered in the presence of

Susan Williams  
Margely Rosa

By: [Signature]

State of Florida  
County of Dade

Be It Known, That on the 7th day of April, 1995, before me, Margely Rosa a  
NOTARY PUBLIC in and for the State of Florida duly commissioned and sworn,  
dwelling in the City of Miami, County of Dade, personally came and appeared  
Adolfo Malave as President of 1044-INC to me personally known, and  
known to me to be the same persons described in and who executed the within power of  
attorney, and acknowledged the within power of attorney to be the act and deed.

In Testimony Whereof, I have hereunto subscribed my name and affixed my seal  
of notary day and year last above written.