

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L19080

FILED  
Feb 19, 2011  
Secretary of State

Entity Name: FORTY FOUR CORPORATION

**Current Principal Place of Business:**

% WANDERLEY BATISTA DE ALMEIDA  
782 LE JEUNE ROAD, #436  
MIAMI, FL 33126

**New Principal Place of Business:**

782 LE JEUNE ROAD, #436  
MIAMI, FL 33126 BR

**Current Mailing Address:**

% WANDERLEY BATISTA DE ALMEIDA  
782 LE JEUNE ROAD, #436  
MIAMI, FL 33126

**New Mailing Address:**

782 LE JEUNE ROAD, #436  
MIAMI, FL 33126 US

FEI Number: 65-0146787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DE ALMEIDA, WANDERLEY BATISTA  
782 LE JEUNE ROAD, SUITE 436  
MIAMI, FL 33126 US

**Name and Address of New Registered Agent:**

ALMEIDA, WANDERLEY B MR  
782 LE JEUNE ROAD, SUITE 436  
SUITE 436  
MIAMI, FL 33126 US

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.

SIGNATURE: WANDERLEY BATISTA DE ALMEIDA

02/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MR  
Name: ALMEIDA, WANDERLEY B  
Address: 65 GENERAL GAUDIE LEY  
City-St-Zip: SAO PAULO, BRASIL, SP 04788130 BR

Title: MRS  
Name: ALMEIDA, INGRID K  
Address: 65 GENERAL GAUDIE LEY  
City-St-Zip: SAO PAULO, SP 04788130 BR

Title: MRS  
Name: ALMEIDA, MARIA J  
Address: 235 NORMAN PROCHET  
City-St-Zip: SAO PAULO, SP 04788000 BR

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WANDERLEY BATISTA DE ALMEIDA

MR

02/19/2011

Electronic Signature of Signing Officer or Director

Date