

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M55135 (1)

1. Corporation Name
MORSA INVESTMENT CORPORATION

Principal Place of Business % JOSE SAAVEDRA P.O. BOX 654138 MIAMI FL 33265	Mailing Address % JOSE SAAVEDRA P.O. BOX 654138 MIAMI FL 33265
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2. Principal Place of Business 21 State Apt # etc 22 City & State 23	2a. Mailing Address 26 State Apt # etc 27 City & State 28
24	25
29	30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/08/1987	3a. Date of Last Report 05/23/1994
4. FEI Number 59-2820922	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
6. This corporation has liability for delinquency fee under 22-105, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**SAAVEDIS, JOSE M.
5267 WEST 26 CT.
HIALEAH FL 33016**

10. Name and Address of New Registered Agent

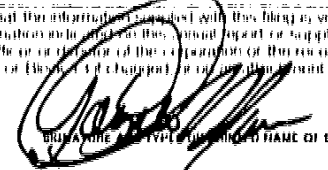
B1 Name Saavedra, Jose, M
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL
B5 Zip Code

11. Pursuant to the provisions of Sections 607.06, 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 Sections 607.06, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME PTD SAAVEDRA, JOSE P.O. BOX 654138 N/A MIAMI FL	14 TITLE [Change] [Addition]	15 NAME	16 STREET ADDRESS Miami, FL 33265
NAME VSD MORA, GONZALO P.O. BOX 654138 N/A MIAMI SPRINGS FL	17 NAME	18 NAME	19 STREET ADDRESS Miami, FL 33265
NAME	20 NAME	21 NAME	22 STREET ADDRESS
NAME	23 NAME	24 NAME	25 STREET ADDRESS
NAME	26 NAME	27 NAME	28 STREET ADDRESS
NAME	29 NAME	30 NAME	31 STREET ADDRESS
NAME	32 NAME	33 NAME	34 STREET ADDRESS
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NAME	41 NAME	42 NAME	43 STREET ADDRESS
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NAME	56 NAME	57 NAME	58 STREET ADDRESS
NAME	59 NAME	60 NAME	61 STREET ADDRESS
NAME	62 NAME	63 NAME	64 STREET ADDRESS
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NAME	77 NAME	78 NAME	79 STREET ADDRESS
NAME	80 NAME	81 NAME	82 STREET ADDRESS
NAME	83 NAME	84 NAME	85 STREET ADDRESS
NAME	86 NAME	87 NAME	88 STREET ADDRESS
NAME	89 NAME	90 NAME	91 STREET ADDRESS
NAME	92 NAME	93 NAME	94 STREET ADDRESS
NAME	95 NAME	96 NAME	97 STREET ADDRESS
NAME	98 NAME	99 NAME	100 STREET ADDRESS

14. I hereby certify that the information provided with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included in 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 of changes to officers and directors.

SIGNATURE: 

5/15/94 (805) 421-9233

0432130 FP

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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Northam
Secretary of State
DIVISION OF CORPORATIONS

AS FILED
AND
FILED

95 MAY 22 11:10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M55164

(1)

HEARTWOOD 91-2 INCORPORATED

Principal Place of Business
**% JOHN E. ABDO
1750 E SUNRISE BLVD
FT. LAUDERDALE FL 33304**

Mailing Address
**% JOHN E. ABDO
1750 E SUNRISE BLVD
FT. LAUDERDALE FL 33304**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/08/1987** 3a. Date of Last Report **05/01/1994**

4. FCI Number **65-0003145** 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's liability for delinquency fee under C. 100.001, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21. State Apt. # etc.
22. City & State
23. City & State
24. City & State
25. City & State
26. Mailing Address
27. State Apt. # etc.
28. City & State
29. City & State
30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CARVALHO, JEAN
1705 E SUNRISE BLVD
FT. LAUDERDALE FL 33304**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code **FL**

11. Pursuant to the provisions of Sections 607.08(3) 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 Sections 607.08(3) and 607.1508, Florida Statutes.

SIGNATURE

Signature of person accepting appointment as registered agent or officer or director

Signature of New Registered Agent or Registered Agent

Date

12. OFFICERS AND DIRECTORS **13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS**

1. NAME 2. STREET ADDRESS 3. CITY & STATE	PD ABDO, JOHN E. 1750 E SUNRISE BLVD FT. LAUDERDALE FL S CARVALHO, JEAN 1750 E. SUNRISE BLVD. FT. LAUDERDALE FL	1. NAME 2. STREET ADDRESS 3. CITY & STATE	☐ Change ☐ Addition
4. NAME 5. STREET ADDRESS 6. CITY & STATE	Y EANES, JASPER R 1750 E. SUNRISE BLVD. FT. LAUDERDALE FL	7. NAME 8. STREET ADDRESS 9. CITY & STATE	☐ Change ☐ Addition
10. NAME 11. STREET ADDRESS 12. CITY & STATE		13. NAME 14. STREET ADDRESS 15. CITY & STATE	☐ Change ☐ Addition
16. NAME 17. STREET ADDRESS 18. CITY & STATE		19. NAME 20. STREET ADDRESS 21. CITY & STATE	☐ Change ☐ Addition
22. NAME 23. STREET ADDRESS 24. CITY & STATE		25. NAME 26. STREET ADDRESS 27. CITY & STATE	☐ Change ☐ Addition
28. NAME 29. STREET ADDRESS 30. CITY & STATE		31. NAME 32. STREET ADDRESS 33. CITY & STATE	☐ Change ☐ Addition
34. NAME 35. STREET ADDRESS 36. CITY & STATE		37. NAME 38. STREET ADDRESS 39. CITY & STATE	☐ Change ☐ Addition
40. NAME 41. STREET ADDRESS 42. CITY & STATE		43. NAME 44. STREET ADDRESS 45. CITY & STATE	☐ Change ☐ Addition

14. The undersigned hereby certifies that the information supplied with this filing is voluntarily furnished and that it is true and correct and that any signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the registered agent or person empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:

Jean Carvalho
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/95