

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000039538 (2)

1. Corporation Name

1440 IMPORTS, INC.

APPROVED
AND
FILED

95 APR 28 AM 10: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1440 ALTON ROAD
MIAMI BEACH FL 33139

Mailing Address

1440 ALTON ROAD
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1993

3a. Date of Last Report

11/07/1994

4. FEI Number

65-0419406

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under § 160.012,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

28

MIAMI FLORIDA

Zip

29

33142

Country

30

0402

9. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES INC
801 NORTHEAST 167TH STREET
SUITE 300
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent required for change of registered agent only)

(Signature of Registered Agent required for change of registered office only)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

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CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE

15 NAME

16 STREET ADDRESS

17 CITY, ST, ZIP

18 TITLE

19 NAME

20 STREET ADDRESS

21 CITY, ST, ZIP

22 TITLE

23 NAME

24 STREET ADDRESS

25 CITY, ST, ZIP

26 TITLE

27 NAME

28 STREET ADDRESS

29 CITY, ST, ZIP

30 TITLE

31 NAME

32 STREET ADDRESS

33 CITY, ST, ZIP

34 TITLE

35 NAME

36 STREET ADDRESS

37 CITY, ST, ZIP

38 TITLE

39 NAME

40 STREET ADDRESS

41 CITY, ST, ZIP

42 TITLE

43 NAME

44 STREET ADDRESS

45 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that it 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 registered agent empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANSELMO HERNANDEZ APRIL 10/1995 634-2401