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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P94000037356 (0)

MORCOM, INC.

DOCUMENT #

Principa	il Place of	Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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28

29

Country

9. Name and Address of Current Registered Agent

25

8025 SW 14TH TERRACE MIAMI FL 33144

2, Principal Place of Business

MORRISON, PATRICK

MIAMI FL 33144

8025 SW 14TH TERRACE

Suite, Apt. #, etc

City & State

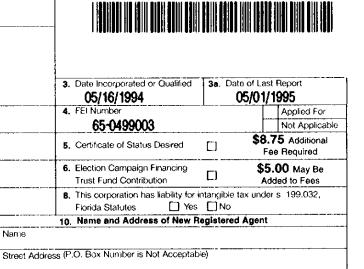
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Ζip

8025 SW 14TH TERRACE MIAMI FL 33144



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

Country

81 Name

82

83

84 City

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SIGNATURE Signature, typed or printed runne of registered agent and title if epinicable (NOTE: Registered Agent agnature required when reinstating) OATE						
2.	OFFICERS AND DIFFECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TLF	D	☐ DEFECE	1. 1 TITLE	☐ Change	☐ Add-tion	
MĒ	MORRISON, PATRIC		1.2 NAME			
REET ADDRESS	8025 SW 14TH TERRACE		1.3 STREET ADDRESS			
Y-ST-7IP	MIAMI FL 33144		1.4 CITY - ST - ZIP			
LF		☐ DELETE	2. 1 TITLE	☐ Change	Addition	
v#E			2.2 NAME			
REET ADDRESS			2 3 STREET ADDRESS			
Y-S1-7P			2 4 CITY - ST- ZIP			
.F		DELETE	3. 1 TITLE	☐ Change	Addition	
ΛE			3.2 NAME			
REET ADDRESS			3.3 STREET ADDRESS			
Y - \$1 - ZIP			3.4 CITY - ST - ZIP			
LE		☐ DELETE	4. 1 TITLE	Change	Addition Addition	
ME			. 4.2 NAME			
REET ADDRESS			4.3 STREFT ADDRESS			
Y - S1 - ZIP			4 4 City - St - ZIP			
.E		DE_ETE	5 1 TITLE	☐ Change	Addition Addition	
ME			5.2 NAME			
REET ADDRESS			5.3 STREET ADDRESS			
Y-ST-ZIP			5.4 CITY-ST-ZIP			
.F		☐ DELETE	6 1 TITLE	Change	Addition	
ИE			6.2 NAME			
REET ADDRESS			6 3 STREET ADDRESS			
TY-ST-ZIP			6 4 CITY - ST - ZIP			

r up mereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on 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 if changed, or on an attachment with an address.