

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

DOCUMENT # P94000081488 (6)

1. Corporation Name

1441-P INC.

Principal Place of Business

4570 SW 151ST PL
MIAMI FL 33185

Mailing Address

4570 SW 151ST PL
MIAMI FL 33185

APPROVED
AND
FILED

95 MAY -1 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300001519173

-06/21/95--01037--019

*****200.00 *****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/07/1994

3a. Date of Last Report

2. Principal Place of Business

21 5805 Blue Lagoon Dr

Suite, Apt. #, etc

22 Ste 450

City & State

23 miami FL

Zip

24 33126

Country

25 U.S.A.

2a. Mailing Address

26 5805 Blue Lagoon Dr

Suite, Apt. #, etc

27 Ste 450

City & State

28 miami FL

Zip

29 33126

Country

30 U.S.A.

4. FEI Number

APPLIED FOR

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RODRIGUEZ, JORGE A
3010 SW 137TH AVE, 224
MIAMI FL 33186

81 Name
JORGE RODRIGUEZ / FREUNO FISHER

82 Street Address (P.O. Box Number is Not Acceptable)
KILLIAN PROFESSIONAL VILLAGE

83 10729 SW 104 ST

84 City
MIAMI

FL

85

Zip Code
33176

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 of person in printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when re-registering)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	DS
NAME	MOSER, ANDRES
STREET ADDRESS	4570 SW 151ST PL
CITY, ST, ZIP	MIAMI FL 33185
TITLE	DP
NAME	MATAS, JORGE
STREET ADDRESS	15020-H SW 48TH TER
CITY, ST, ZIP	MIAMI FL 33185
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

REMITTED BY MAY 1

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andres Moser

4-24-95

305 262 2202