FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000087734 (7)

441 INVESTMENTS INC.

FILED May 09 1997 8:00am Secretary of State

Principal Place 2660 NE 29 ST FT LAUDERDA	T	Mailing Address 2660 NE 29 ST FT LAUDERDALE FL 33306	-1919				
				3. Date Incorporated or Qualifier 12/02/1994		of Last Re 5/1996	port
	lace of Business	2a. Mailing Address	k { 13	4. FEI Number			plied For
21 31011 Suite, Apt		9 26 301. M. Te	ederal Hwy	59-3301374		\$8.75 A	t Applicable
22 Suit	ce 504	27 Suite 50	J4	6. Certificate of Status Desired	$oldsymbol{eta}$	Fee Re	
City & State		City & State	11-61	6. Election Campaign Financing	F=3	\$5.00	
23 1-4.1	auderdale, t	L 28 tt. Lande	Country	Trust Fund Contribution		Added to	
^{Zip} ろ33	306 25 USA		30 USA	This corporation has liability for Florida Statutes	or intangible ta Ves	x under s. No	199.032,
<u> </u>	9. Name and Address of Curi		30 0-37	10. Name and Address of New			
QUI	reshi, denise		81 Name C	Durest: Don	ise		
2880 NE 29 ST				dress (P.O. Box Number is Not Accep			
FT	LAUDERDALE FL 33306		3101	N. Federal H	wy		
			83 Sui	te 504	,		
			84 City,	1-1-10	FL	85 Zip C	Code
11 Pursuant	to the provisions of Sections 607.0	1502 and 607 1508. Florida Statute	s the above-named col	poration submits this statement for th			
office or n	egistered agent, or both, in the Sta	te of Florida. Such change was at	uthorized by the corpora	ation's board of directors. I hereby acc	cept the appoir	itment as	registered
	\bigcirc	Dor	oise Quiesh				
SIGNATURE	Signature typod or printed name of registered		Registered Agent signature requ		4-30 DATE		
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OF		******	
TALE	DP Qureshi, Denise	☐ DELETE	11 TITLE		×	Change	Addition
NAME CAST LABORES	2880 NE 29 ST		1.2 NAME				
STREET ADDRESS OHY-S1-ZIP	FT LAUDERDALE FL		1.3 STREET ADDRESS	1. Landerdale, Fl	232	Μ (
CHT-SI-ZIF				1. Laucker Date 11.			Addition
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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; the Lam 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.

SIGNATURE:

BIONATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-5

954-537-7776