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

PROFIT .
CORPORATION
ANNUAL\*REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400087734 (7)

## FILED May 19 1998 8:00am Secretary of State

441 INVESTMENTS, INC.	ali (Bara (1)) alai (A)
Principal Place of Business Mailing Address	0 k1 80 8 8 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3101 N. FEDERAL HWY 3101 N. FEDERAL HWY	
SUITE 504 SUITE 504	ACE.
FT LAUDERDALE FL 33306 DO NOT WRITE IN THIS SPA US US 3. Date Incorporated or Qualified	ACE .
12/02/1994	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
26 59-3301374	Not Applicable
	\$8.75 Additional
27 5. Certificate of Status Desired 22	Fee Required
City & State City & State 6. Election Campaign Financing	\$5.00 May Be
28 Trust Fund Contribution	Added to Fees
Zip Country Zip Country 8. This corporation owes or has paid the current Country 2 cou	
25 29 30 Personal Property Tax due June 30.   9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
	<u> </u>
GUNEONI, DENIOC	
SUITE 504  Street Address (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33306	
FL	85 Zip Code
All Pursuant to the provisions of Sections 507 0502 and 507 1508 Florida Statutes the above pared corporation submits this statement for the purpose of ch	hanging 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 appoir agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ntment as registered
SIGNATURE Signature, based or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling)  DATE	
12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND D	
	Change
NAME QURESHI, DENISE 1.2 NAME	
STREET ADDRESS 2880 NE 29 ST 13 STREET ADDRESS 7.7.2.0.1-	ļi
CITY-ST-ZIP FT LAUDERDALE FL 14 CITY-ST-ZIP 33306	Change Addition
	T purange CT sequence
NAME 22 NAME	
STREET ADDRESS 2.3 STHEET ADDRESS 2.4 CUTY CT. 780	
CITY-S1-ZIP         2.4 CITY-S1-ZIP           TITLE         DELETE         3.1 TITLE	Change Addition
NAME 32 NAME	
STREET ADDRESS : 3.3 STREET ADDRESS	
CITY-ST-ZIP 34. CITY-ST-ZIP	
	Change Addition
NAME 4. 2 NAME	İ
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-S1-ZIP 4.4 CITY-S1-ZIP	
CITY-S1-ZIP 4.4 CITY-S1-ZIP	Change Addition
CITY-S1-ZIP 4.4 CITY-S1-ZIP	Change Addition
CITY-S1-ZIP         4.4 CITY-S1-ZIP           TITLE         DELETE         5.1 TITLE	Change Addition
A4 CITY-S1-ZIP	
A4 CITY - ST - ZIP	Change Addition
A4 CITY-S1-ZIP	
A4 CITY-S1-ZIP	

I. I 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; 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.