

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 # S58268

(1)

1. Corporation Name

MORSA CORPORATION

APPROVED
AND
FILED

1995 APR 25 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

100 WEST CYPRESS CREEK RD.
SUITE 700
FT. LAUDERDALE FL 33309-2165

Mailing Address

100 WEST CYPRESS CREEK RD.
SUITE 700
FT. LAUDERDALE FL 33309-2165

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/10/1991

3a. Date of Last Report

05/20/1994

4. FEI Number

65-0274044

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

GERALD GREENSPOON, ESQ.

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

100 W. Cypress Creek Road, #700

83

84 City

Fort Lauderdale

85 FL

86 Zip Code

33309

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]
Signature, typed or printed name of registered agent and title if new (signature required when renewing)

DATE

4/12/95

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

LEVI, JACK

STREET ADDRESS

72 LOS GRANADOS #72

CITY - ST - ZIP

LA CASTELLANA, CARAC

TITLE

VD

NAME

LEVI, SARAH

STREET ADDRESS

72 LOS GRANADOS #72

CITY - ST - ZIP

LA CASTELLANA, CARAC

TITLE

DS

NAME

LEVI, HENRY

STREET ADDRESS

LAS SAMANES, #1-D

CITY - ST - ZIP

LACASTELLANA CARACAS

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

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR
JACK LEVI, President

04/12/95 (25) 491-1120