2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

S58268

1. Entity Name

MORSA CORPORATION Mailing Address Principal Place of Business

FILED Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90371 020 ***150.00

SUITE 700 FT. LAUDERDALE FL 33309-2165			SUITE 700 FT. LAUDERDALE FL 33309-2165									
2. Principal Place of Business			3. Maili	3. Mailing Address					(i i i i i i i i i i i i i i i i i i i		
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & Stat	ie .		City	& State		<u>-</u>	4. 1	FEI Number 65-0274044			plied For	
Zip	Country		Zip	Zip		Country		Certificate of Status Desired		8.75 Add	litional	
6. Name and Address of Current Registered Agent							7. 1	Name and Address of New Regis	stered A	jent		
						Name						
GREENSPOON, GERALD ESQ				<u> </u>			Street Address (P.O. Box Number is Not Acceptable)					
100 WEST	CYPRESS	CREEK ROAD					Street Address (F.O. box Number is Not Acceptable)					
SUITE 700									_			
	erdale fl	33309 ()		City			FL	Zip Cod	э			
8. The above named entity submits rise tatement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.												
	Signature, typed	or printed name of registered agent a	and title if appli	icable. (NOTE:	Registered	d Agent signatur	e required when re	instating)	DATE			
F After Make Check						Election Campaign Financ Trust Fund Contribution.		Added	May Be to Fees			
10.	OFFICERS AND D		DIRECTOR			11.		DITIONS/CHANGES TO OFFICE				
TITLE NAME STREET ADORESS CITY-ST-ZIP		, JACK : RIVER GARDEN 72							Change	Addition		
TITLE	VD			☐ Delete 1		: <u> </u>	·	☐ Change ☐			Addition	
NAME	LEVI, HENRY			NAM		E			•		ļ	
STREET ADDRESS CITY-ST-ZIP	CARACAS	r garden 72 Venezuela 1060				ET ADORESS - ST-ZIP						
TITLE	n2	and the same of th		☐ Delete	TITLE	: ئ. مىنىست			-	Change	Addition	
NAME	MORRIS, L				NAME	E ,						
		R GARDEN 72				ET ADDRESS						
CITY-ST-ZIP		VENEZUELA CA 1060			CITY	-ST-ZIP						
TITLE	VD			☐ Delete	TITLE					Change	Addition	
NAME `	LEVI, AND				NAME							
STREET ADDRESS		R GARDEN 72				ET ADDRESS						
CITY-ST-ZIP	CAHACAS	VENEZUELA CA 1060			ÇITY-	-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete					[□ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		1			i	Change	☐ Addition	
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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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the receiver or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED