

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 10:02

DOCUMENT # V65943 (5)

1. Corporation Name

Q MORTGAGE & INVESTMENTS, INC.

Principal Place of Business

3924 N.W. 167 ST.
MIAMI FL 33054
US

Mailing Address

10451 W. BROWARD BLVD.
#206
PLANTATION FL 3324
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/21/1992

3a. Date of Last Report

03/16/1994

4. FEI Number

65-0360598

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

2a. Mailing Address

21 3530 Mystic Pointe Drive
Suite, Apt. #, etc. #1102

26 3530 Mystic Pointe Drive
Suite, Apt. #, etc. #1102

22 City & State
N. Miami Beach FL

27 City & State
N. Miami Beach FL

23 Zip
33180

28 Zip
33180

24 Country
US

29 Country
US

9. Name and Address of Current Registered Agent

SASSI, CLAUDIO
3924 N.W. 167TH ST.
MIAMI FL 33054

10. Name and Address of New Registered Agent

81 Name

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

3530 Mystic Pointe Drive #1102

83

84 City

N. Miami Beach

FL

85 Zip Code

33180

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 of 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 registered agent or authorized officer and the filer)

(Signature of registered agent or authorized officer and the filer)

(Date)

12. OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY, ST., ZIP
D SASSI, CLAUDIO	10451 W. BROWARD BLVD	PLANTATION FL
NAME	STREET ADDRESS	CITY, ST., ZIP
NAME	STREET ADDRESS	CITY, ST., ZIP
NAME	STREET ADDRESS	CITY, ST., ZIP
NAME	STREET ADDRESS	CITY, ST., ZIP
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NAME	STREET ADDRESS	CITY, ST., ZIP
NAME	STREET ADDRESS	CITY, ST., ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE	15 NAME	16 STREET ADDRESS	17 CITY - ST - ZIP	18 Change	19 Addition
		3530 Mystic Pointe Drive #1102	N. Miami Beach, FL 33180	☒	☐
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	☐ Change	☐ Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	☐ Change	☐ Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	☐ Change	☐ Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	☐ Change	☐ Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	☐ Change	☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 193.076, 193.077, 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 and Block 13, or on an attachment with an address.

SIGNATURE:

Claudio Sassi

(Signature and typed or printed name of signing officer or director)

Claudio Sassi

2/16/95

933-9261