

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000045167

Entity Name: MOE ENTERPRISES, CORP.

FILED  
Apr 27, 2012  
Secretary of State

**Current Principal Place of Business:**

6646 AUDOBON TRACE  
WEST PALM BEACH, FL 33412

**New Principal Place of Business:**

**Current Mailing Address:**

6646 AUDOBON TRACE  
WEST PALM BEACH, FL 33412

**New Mailing Address:**

FEI Number: 20-2662539

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOSLEY, ELMER L  
6646 AUDOBON TRACE  
WEST PALM BEACH, FL 33412 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MOSLEY, ELMER L  
Address: 6646 AUDOBON TRACE  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: O  
Name: GRANT, MAURICE  
Address: 6646 AUDOBON TRACE  
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: O  
Name: LEATH, MARK  
Address: 6646 AUDOBON TRACE  
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: O  
Name: MACK, HENRY W  
Address: 6646 AUDOBON TRACE  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: O  
Name: MOSLEY, SHERROD L  
Address: 6646 AUDOBON TRACE  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: O  
Name: MOSLEY, MONIQUE L  
Address: 6646 AUDOBON TRACE  
City-St-Zip: WEST PALM BEACH, FL 33412

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ELMER MOSLEY

CEO

04/27/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date