

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004040

**Entity Name:** SC MOTA GP, INC.

**FILED**  
**Apr 11, 2013**  
**Secretary of State**  
**CC5020692938**

**Current Principal Place of Business:**

340 ROYAL POINCIANA WAY  
SUITE 316  
PALM BEACH, FL 33480

**Current Mailing Address:**

340 ROYAL POINCIANA WAY  
SUITE 316  
PALM BEACH, FL 33480 US

**FEI Number:** 20-1354663

**Certificate of Status Desired:** No

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

TSO AGENT SERVICES, LLC  
340 ROYAL POINCIANA WAY  
SUTIE 316  
PALM BEACH, FL 33480 US

*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

**Officer/Director Detail :**

Title PD  
Name KOSOY, BRIAN D  
Address 340 ROYAL POINCIANA WAY SUITE 316  
City-State-Zip: PALM BEACH FL 33480

Title VD  
Name GREEN, ROBERT S  
Address 4650 DONALD ROSS ROAD SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VS  
Name MOROSS, GREG  
Address 340 ROYAL POINCIANA WAY SUITE 316  
City-State-Zip: PALM BEACH FL 33480

Title VT  
Name COSTELLO, VINCENT J  
Address 340 ROYAL POINCIANA WAY SUITE 316  
City-State-Zip: PALM BEACH FL 33480

Title D  
Name PRESTON, JOHN W.S.  
Address 4650 DONALD ROSS ROAD SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33418

*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:** BRIAN D KOSOY

**AUTHORIZED PERSON**

**04/11/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date