

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 625260

FILED
Apr 26, 2005
Secretary of State

Entity Name: MOCAR ENTERPRISES, INC.

Current Principal Place of Business:

8450 PENSACOLA BLVD
PENSACOLA, FL 325344359

New Principal Place of Business:

Current Mailing Address:

8450 PENSACOLA BLVD
PENSACOLA, FL 325344359

New Mailing Address:

FEI Number: 59-3271130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARPENTER, CHRISTINA
8450 PENSACOLA BLVD.
PENSACOLA, FL 32534 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CARPENTER, MARSHALL, III
Address: 3140 SONYA ST.
City-St-Zip: PACE, FL 32571 US

Title: PD () Delete
Name: CARPENTER, MARSHALL, O JR
Address: 8450 PENSACOLA BLVD
City-St-Zip: PENSACOLA, FL 32534 US

Title: TD () Delete
Name: CARPENTER, LARA
Address: 527 S. 1ST STREET
City-St-Zip: PENSACOLA, FL 32507 US

Title: S () Delete
Name: CARPENTER, LARA L.,
Address: 527 S. 1ST STREET
City-St-Zip: PENSACOLA, FL 32507 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARSHALL O CARPENTER III

VD

04/26/2005

Electronic Signature of Signing Officer or Director

Date