

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006562

FILED
Apr 19, 2004
Secretary of State

Entity Name: INVESTMO CORPORATION

Current Principal Place of Business:

PO BOX 3152
ROAD TOWN, TORTOLA, BVI,

New Principal Place of Business:

PO BOX 3152
ROAD TOWN, TORTOLA, BVI, BV BVI

Current Mailing Address:

650 S. PARK ROAD
APT. 5-27
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 98-0359961 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERKIN, STEWART A
444 BRICKELL AVE., STE 300
MIAMI, FL 33131 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: PD () Delete
Name: BENMOUSSA, PIERRE
Address: 18 AVENUE BARA
City-St-Zip: LA VARENNE ST HILANE FRANCE,

Title: SD () Delete
Name: BENMOUSSA, YOLAINE M
Address: 18 AVENUE BARA
City-St-Zip: LA VARENNE ST HILANE FRANCE,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PIERRE BENMOUSSA

PD

04/19/2004

Electronic Signature of Signing Officer or Director

_____ Date