## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000001549

Entity Name: MORE ASSETS INCORPORATED

FILED Jan 11, 2008 Secretary of State

Current F	rincipal Place of	Duamess.	New Principal Place	: OI Dusilless.
9300 FLAIR DRIVE #100 EL MONTE, CA 91731		9300 FLAIR DRIVE		
		#100 EL MONTE, CA 917;	31	
Current N	Mailing Address:		New Mailing Addres	
	_			
	R DRIVE #100 E, CA 91731		9300 FLAIR DRIVE #100 EL MONTE, CA 9173	31
FEI Number	: 77-0630908	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of Cur	rent Registered Agent:	Name and Address	of New Registered Agent:
HICHEZ, ( 2905 SW MIAMI, FL	36 AVE 33133 US			
	e named entity sub e of Florida.	mits this statement for the p	ourpose of changing its register	ed office or registered agent, or bot
0				
SIGNATU	RE:			
	RE:	Signature of Registered Age	ent	Date
SIGNATU	RE: Electronic	Signature of Registered Ageust Fund Contribution ( ).	ent	Date
SIGNATU	RE: Electronic	ust Fund Contribution ( ).		Date
SIGNATU	RE:Electronic mpaign Financing Ti	ust Fund Contribution ( ).  RS: lete #100		
SIGNATU  Election Ca  OFFICER  Title:  Name:  Address:	RE:  Electronic  mpaign Financing Tr  S AND DIRECTO  D () De POOLE, MICHAEL 9300 FLAIR DRIVE	ust Fund Contribution ( ).  RS: lete #100 731 lete #100	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTO
Election Ca  OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address:	RE: Electronic  mpaign Financing Ti  S AND DIRECTO  D () De POOLE, MICHAEL 9300 FLAIR DRIVE EL MONTE, CA 91  P () De RANGEL, HECTOR 9300 FLAIR DRIVE	ust Fund Contribution ( ).  RS: lete #100 731 lete #100 731 lete TER #100	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: D Name: HERNAND Address: 9300 FLAI	ES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CESAR R ZALAMEA S 01/11/2008