FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90016 022 ***150.00

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	_								

1. Corporation Name

MORE MONEY INC.

Principal Place	of Business	Mailing Address				
8377 S.W. 40TH		8377 S.W. 40TH STREET				
MIAMI FL 33155	i	MIAMI FL 33155		DO NOT WRITE IN THIS	SPACE	
US		US		3. Date Incorporated or Qualifed	7,0,7,10,2	
Ì				02/06/1986	}	
	CD. Co.	2a. Mailing Address		4. FEI Number	Applied For	
<u> </u>	ace of Business	⊢	<u></u>	59-2637191	Not Applicable	
Suite, Apt, #	# ata	Suite, Apt. #, etc.			\$8.75 Additional	
<u> </u>	4, etc.	27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
<u>⊢</u> ¬ ′	7	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year In	tangible	
⊢ ¬	25 29 30		¬ •	Personal Property Tax.		
24	9. Name and Address of Current		<u>'</u>	10. Name and Address of New Registered	Agent	
	0. 112110 4114 7124 913 01 01 11		81 Name			
GAR	ICIA, DIANA			(D.O. D		
8377	SW 40TH STREET		82 Street Address	ess (P.O. Box Number is Not Acceptable)		
MIAM	N FL 33155		83	The state of the second		
				The disk display a	1-1-0-1	
1			84 City 7m	i ami	_ 85 Zip Code _ 3318	
11 Dusquent	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above-named corp		f changing its registered	
office or re	egistered agent, or both, in the State of	Florida. Such change was auth	orized by the corporation	oration submits this statement for the purpose on a board of directors. I hereby accept the appoints	intment as registered	
agent, I ar	n familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable /NOTE: Re	gistered Agent signature required	d when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	CHM	DELETE	1,1 TITLE		Change	
NAME	GARCIA, DIANA S		12.NAME	IANA GARCÍA	· ` '	
STREET ADDRESS	8377 SW 40TH STREET		1.3 STREET ADDRESS	831 SW 134 Phil		
1	MIAMI FL 33155		14 CITY-ST-ZIP	831 SW 134 PL. MIAMI FL 33184		
CITY-ST-ZIP	MIAMITE GOTOG	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
ļ ···-			2.2 NAME			
NAME			2.3 STREET ADDRESS		}	
STREET ADDRESS						
CITY-ST-ZIP		☐ DELETE	2.4 CITY-ST-ZIP		Change Addition	
TITLE		רון טבנבוב		No. of the Control of		
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		1	
CITY: ST-ZIP.			3.4. CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE		☐ DELETE	4.1 TITLE			
NAME			4, 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE		☐ DELETE	5.1 TITLE			
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		ł	
0			5.4 CITY-ST-ZIP			

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

TITLE

STREET ADDRESS

MUIRED SIGNING OFFICER OR DIRECTOR

Change

☐ Addition