2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State
02-26-2007 90064 009 ****61.25

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1. Entity Name
MOVE ON PHILIPPINES INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
9118 SPINDLETREE WAY JACKSONVILLE, FL 32256	9118 SPINDLETREE WAY JACKSONVILLE, FL 32256

02212007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 42-1656708 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FLIPPIN, DOREEN
9118 SPINDLETREE WAY
JACKSONVILLE, FL 32256

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CANOY, KAREN 2133 SERVICE CT. SANTA ROSA, CA 95403	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CANOY, KAREN 1983 DOGWOOD DRIVE SANTA ROSA, CA 95403	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD FLIPPIN, DOREEN 9118 SPINDLETREE WAY JACKSONVILLE, FL 32256	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MORTILLERO, FLORIDA E KATSUSHIKA-KU, 2-18-13 HIGASHI KANAMACHI MARUTAKE BLDG.306, TOKYO,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEREZ, VIRGILIO 3026 SHADY CREEK LANE CORPUS CHRISTI, TX 78414	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD VICENTE, WARLITO 4490 WATER TREE DR. #2 MEMPHIS, TN 38118	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD VICENTE, WARLITO 8646 SUNNYVALE STREET N CORDOVA, TN 38018	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VICENTE, VINCENT 250 BEAU DRIVE #2 DES PLAINES, IL 60016	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VICENTE, VINCENT 572 W. IDA CT #1 MOUNT PROSPECT, IL 60056	☑ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOREEN FLIPPIN February 22, 2007 (904) 318-0825
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #