

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2009
Secretary of State

DOCUMENT# N08000010568

Entity Name: MORECHA INC

Current Principal Place of Business:

8119 N HILLSBOROUGH LANE
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

8119 N HILLSBOROUGH LANE
TAMPA, FL 33604

New Mailing Address:

FEI Number: 26-3681869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FELIX, MARC D
8119 N HILLSBOROUGH LN
TAMPA, FL 33604 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FELIX, MARC D
Address: 8119 N HILLSBOROUGH LN
City-St-Zip: TAMPA, FL 33604

Title: VP () Delete
Name: JEAN, WILLIAMCEAU
Address: 15001 CARIBOU COURT
City-St-Zip: LUTZ, FL 33559

Title: VP () Delete
Name: LARRIEUX, JEPHTHE J
Address: 6004 UNICE AVE N
City-St-Zip: LEHIGH ACRES, FL 33971

Title: SEC () Delete
Name: LARRIEUX, LONISE
Address: 6004 UNICE AVE N
City-St-Zip: LEHIGH ACRES, FL 33971

Title: TRES () Delete
Name: FELIX, GERALDA
Address: 8119 N HILLSBOROUGH LN
City-St-Zip: TAMPA, FL 33604

Title: SEC () Delete
Name: OSCAR, DANIEL
Address: 3547 GLENN DR.
City-St-Zip: FORT MYERS, FL 33901

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:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARC DONALD FELIX

P

09/03/2009

Electronic Signature of Signing Officer or Director

_____ Date