


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # N96000002653 1. Entity Name UNTOUCHABLE MOCKO JUMBIES, INC. |  |
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| Principal Place of Business 300 ALADDIN STREET OPA-LOCKA, FL 33054 | Mailing Address 300 ALADDIN STREET OPA-LOCKA, FL 33054 |
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04272004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 65-0667363 | Applied For Not Applicable |
| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent HOWARD, LEON 300 ALADDIN ST MIAMI, FL 33054 |
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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

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

000000139043
04/29/04-80105-016 70.00

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD HOWARD, LEON A 300 ALADDIN STREET OPA-LOCKA, FL 33054 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD ISAAC, LLOYD 300 ALADDIN STREET OPA-LOCKA, FL 33054 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD HOWARD, MONICA 300 ALADDIN STREET OPA-LOCKA, FL 33054 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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IN THIS SPACE**

12. 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 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: Leon Howard / Leon Howard 4/27/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #