## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## May 04, 2005 08:00 AM Secretary of State DOCUMENT # N96000002653 UNTOUCHABLE MOCKO JUMBIES, INC. Principal Place of Business Mailing Address 300 ALADDIN STREET 300 ALADDIN STREET OPA-LOCKA, FL 33054 OPA-LOCKA, FL 33054 04142005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0667363 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HOWARD, LEON DO NOT WRITE 300 ALADDIN ST MIAMI, FL 33054 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS 10. ra da cerción religio de a manderesta en especiencia de fara a como en la lacal la local de la como de la como TITLE MALK HOWARD, LEON A U00000351620 05/05/05-80084-015 70.00 STREET ADDRESS 300 ALADDIN STREET CITY-ST-ZIP OPA-LOCKA, FL 33054 TITLE ۷Đ ISAAC, LLOYD STREET ADDRESS 300 ALADDIN STREET CITY-ST-ZP OPA-LOCKA, FL 33054 STD DEF HOWARD, MONICA STREET ADDRESS 300 ALADDIN STREET DO NOT WRITE CHY-ST-ZIP QPA-LOCKA, FL 33054 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS and heart from the sound of the same and the CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-SY-ZP 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.

Howard

4/30/05

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SIGNATURE:

**FILED**