FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UNIFORM BUSINE	SS REPORT ((UBR)		
DOCUMENT # P00000037 1. Entity Name	738		FILED	
M.O.E., INC.			03 APR 30 AM 9: 46	
in the second se	<u> </u>		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DO NOT WRITE	IN THIS SPA	ACE		
2. Principal Place of Business 5020 SW 141st AVENUE Suite, Apt. #, etc.	3. Mailing Address 5020 SW 141st AVENUE Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
MIAMI, FLORIDA 33175	MIAMI, FLORIDA 33175		4. FEI Number Applied For 2: Not Applied For 3: Not Applicable	
3175 MIAMI-DADE	33175 M	Country I AM I - DADE	E 5. Certificate of Status Desired	
	<u> </u>		7. Name and Address of Current Registered Agent	
DO NOT WRITE			Name LEONARDO BENITEZ Street Address (P.O. Box Number is Not Acceptable)	
IN THIS SPACE		50	020 SW 141st AVENUE	
		City	IAMI FL 33175	
8. The above named entity submits this statement for	the purpose of changing its rec			
SIGNATURE RESPECTABLE OF PRINCE OF TOGETHER AGENT AS		gisterert Agent signature req		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) .	After May 1, Amended U Make Check Payable	1 Fee is \$150.00 Fee is \$550.00 IBR is \$61.25 to Department of !	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	
11. OFFICERS AND IN THE STHEEF ADDRESS CITY-ST-ZIP MIAMI, FL 33175	Z	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500017339765 04/30/0301006006 **150.00	
NAME SIREET ADDRESS CITY-SI-ZIP SDMARIA T BENITEZ STREET ADDRESS MIAMI, FLORIDA		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY ST-ZIP 1/2		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP	· ·	THEE NAME SIREET ADDRESS CHY-ST-ZIP	IN THIS SPACE	
TOTLE NAME STREET ADDRESS CITY-ST-ZP		NAME STREET ADDRESS CHY-ST-ZIP		
NINE NAME SIREET ADDRESS CHY-SI-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
indicated on this report or supplemental report is	true and accurate and that my sowered to execute this report a	signature shall have t	I in Section 119.07(3)(i), Florida Statutes, I further certify that the information e the same legal effect as if made under oath; that I am an officer or director pter 607, Florida Statutes; and that my name appears in Block 11 or on an	

SNATURE: A Regrando Beuts - PRESIDENT 4/1/2003 305-552-7456
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytonie Photie #