

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000052857

FILED
Apr 13, 2007
Secretary of State

Entity Name: MOE'S PARTY RENTALS, INC.

Current Principal Place of Business:

19362 SW 106TH AVENUE
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

19362 SW 106TH AVENUE
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-1012446 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

A. BERNARD FINANCIAL SERVICES, INC.
9032 SW 152ND STREET
MIAMI, FL 33157 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SEONARAIN, MAHASE
Address: 19362 SOUTHWEST 106TH AVENUE
City-St-Zip: MIAMI, FL 33157

Title: SD () Delete
Name: SEONARAIN, HARDAI
Address: 19362 SOUTHWEST 106TH AVENUE
City-St-Zip: MIAMI, FL 33157

Title: TD () Delete
Name: SEONARAIN, ROBERT N
Address: 19362 SOUTHWEST 106TH AVENUE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SEONARAIN, ROBERT N
Address: 19362 SOUTHWEST 106TH AVENUE
City-St-Zip: MIAMI, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO (X) Change () Addition
Name: SEONARAIN, MAHASE
Address: 19362 SOUTHWEST 106TH AVENUE
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT N SEONARAIN

PD

04/13/2007

Electronic Signature of Signing Officer or Director

_____ Date