2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000052857

Entity Name: MOE'S PARTY RENTALS, INC.

FILED Jan 03, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19362 SW 106TH AVENUE 19362 SW 106TH AVENUE MIAMI, FL 33157 CUTLER BAY, FL 33157

Current Mailing Address: New Mailing Address:

19362 SW 106TH AVENUE 19362 SW 106TH AVENUE MIAMI, FL 33157 CUTLER BAY, FL 33157

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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: ANTHONY BERNARD 01/03/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

SEONARAIN, ROBERT N SEONARAIN, ROBERT N Name: Name:

19362 SOUTHWEST 106TH AVENUE 19362 SOUTHWEST 106TH AVENUE Address: Address:

MIAMI, FL 33157 City-St-Zip: City-St-Zip: CUTLER BAY, FL 33157

Title: VPD (X) Change () Addition Title: () Delete SEONARAIN, MAHASE Name: SEONARAIN, HARDAI Name:

19362 SOUTHWEST 106TH AVENUE 19362 SOUTHWEST 106TH AVENUE Address: Address:

MIAMI, FL 33157 CUTLER BAY, FL 33157 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: CFO () Delete TD SEONARAIN, MAHASE SEONARAIN, HARDAI Name: Name:

19362 SOUTHWEST 106TH AVENUE 19362 SOUTHWEST 106TH AVENUE Address: Address:

City-St-Zip: MIAMI, FL 33157 City-St-Zip: CUTLER BAY, FL 33157

Title: () Delete Title: SD () Change (X) Addition SEONARAIN, PREMWATTIE Name: Name:

Address: Address: 19362 SOUTHWEST 106TH AVENUE

City-St-Zip: City-St-Zip: CUTLER BAY, FL 33157

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 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 01/03/2008