

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000092225

Entity Name: MOCHIMA, INC.

FILED
Feb 16, 2006
Secretary of State

Current Principal Place of Business:

C/O AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVENUE, SUITE 900
MIAMI, FL 33131

New Principal Place of Business:

9200 BAY HARBOR TER
2D
MIAMI, FL 33154

Current Mailing Address:

C/O AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVENUE, SUITE 900
MIAMI, FL 33131

New Mailing Address:

9200 BAY HARBOR TER
2D
MIAMI, FL 33154

FEI Number: 65-1146875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVENUE SUITE 900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

TOMASSI, GIANNI
9200 BAY HARBOR TER
2D
MIAMI, FL 33154 US

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: GIANNI TOMASSI

02/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TOMASSI, GIANNI
Address: 9200 BAY HARBOR TERRECE, 2D
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: TD () Delete
Name: FURIATI, KARINA
Address: 9200 BAY HARBOR TERRECE, 2D
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: SD () Delete
Name: OBREGON, JEAN PIERRE
Address: 1200 BRICKELL AVE., SUITE 900
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TOMASSI, GIANNI
Address: 9200 BAY HARBOR TERRACE, 2D
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: TD (X) Change () Addition
Name: FURIATI, KARINA
Address: 9200 BAY HARBOR TERRACE, 2D
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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

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: GIANNI TOMASSI

PD

02/16/2006

Electronic Signature of Signing Officer or Director

Date