

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 8:00 am
Secretary of State

04-15-2004 90016 044 ***150.00

DOCUMENT # P03000018654 1. Entity Name MOTY'S MULTI-SERVICES, INC.			
Principal Place of Business 3148D 30TH AVE NORTH #101 ST PETERSBURG, FL 33173		Mailing Address 3148D 30TH AVE NORTH #101 ST PETERSBURG, FL 33173	
2. Principal Place of Business 1617 NORFOLK ST N.		3. Mailing Address 1617 NORFOLK ST N	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State ST PETERSBURG, FL		City & State ST PETERSBURG, FL	
Zip 33710		Zip 33710	
Country		Country	
4. FEI Number 59-3767604		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CABRERA, OSCAR A 9005 SW 168 COURT MIAMI, FL 33196		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CORREA, YANOGSY P 3148D 30TH AVE NORTH #101 ST PETERSBURG, FL 33173	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YANOGSY PAVON ZERPA 1617 NORFOLK ST N ST PETERSBURG, FL 33710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ORIHUELA, SMYRNA 3148D 30TH AVE NORTH #101 ST PETERSBURG, FL 33173	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1617 NORFOLK ST N ST PETERSBURG, FL 33710
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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 607, 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.			
SIGNATURE: <u>YANOGSY PAVON</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/3/04 (727) 345-9419 Date Daytime Phone #	