

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018654

FILED
Apr 18, 2005
Secretary of State

Entity Name: MOTY'S MULTI-SERVICES, INC.

Current Principal Place of Business:

1617 NORFOLK ST. N
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

1617 NORFOLK ST. N
SAINT PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-3767604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABRERA, OSCAR A
9005 SW 168 COURT
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

PAVON, YANOGSY A
1617 NORFOLK ST N
ST PETERSBURG, FL 33710 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: YANOGSY

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PAVON ZERPA, YANOGSY
Address: 1617 NORFOLK ST. N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: DV () Delete
Name: ORIHUELA, SMYRNA
Address: 1617 NORFOLD ST. N
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: YANOGSY

DP

04/18/2005

Electronic Signature of Signing Officer or Director

Date