

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000046689

FILED
Apr 29, 2004
Secretary of State

Entity Name: MOLDAVIA INCORPORATED

Current Principal Place of Business:

7139 HARBOR HEIGHTS CIRCLE
ORLANDO, FL 32835

New Principal Place of Business:

214 KELLY CIRCLE
SANFORD, FL 327737344

Current Mailing Address:

7139 HARBOR HEIGHTS CIRCLE
ORLANDO, FL 32835

New Mailing Address:

214 KELLY CIRCLE
SANFORD, FL 327737344

FEI Number: 20-0016615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMILTON, TOM
10785 SATELLITE BOULEVARD
ORLANDO, FL 32837

Name and Address of New Registered Agent:

HAMILTON, TOM
214 KELLY CIRCLE
SANFORD, FL 327737344

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: TOM HAMILTON

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REINERT, PAT
Address: 7139 HARBOR HEIGHTS CIRCLE
City-St-Zip: ORLANDO, FL 32835

Title: ST () Delete
Name: HAMILTON, TOM
Address: 10785 SATELLITE BOULEVARD
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REINERT, PAT
Address: 3200 OLD WINTER GARDEN RD #1628
City-St-Zip: ORLANDO, FL 347614535

Title: STD (X) Change () Addition
Name: HAMILTON, TOM
Address: 214 KELLY CIRCLE
City-St-Zip: SANFORD, FL 327737344

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: TOM HAMILTON

STD

04/29/2004

Electronic Signature of Signing Officer or Director

Date