


\$ 150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 22, 2004 8:00 am
Secretary of State

09-22-2004 90002 040 ***150.00

DOCUMENT # P03000102692			
1. Entity Name MULTI MOBILE INC.			
Principal Place of Business 1530 MCMULLEN BOOTH ROAD SUITE D8 CLEARWATER, FL 33759		Mailing Address 1530 MCMULLEN BOOTH ROAD SUITE D8 CLEARWATER, FL 33759	
2. Principal Place of Business 3338 U.S. Hwy 19 Suite, Apt. #, etc.		3. Mailing Address same Suite, Apt. #, etc.	
City & State Holiday FL		City & State	
Zip 34691	Country U.S.	Zip	Country
4. FEI Number 11-3703946		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SOBOTILK, SHARON 1530 MCMULLEN BOOTH ROAD SUITE D8 CLEARWATER, FL 33759 Sharon Sobotik		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2418 Rosehaven Dr. City Wesley Chapel FL Zip Code 33544	
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: _____ DATE: 9-17-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOBOTIK, SHARON 1412 SEAGULL DRIVE, #104 PALM HARBOR, FL 34685 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2418 Rosehaven Drive Wesley Chapel, FL 33544
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CRITTENDEN, BRYAN 1412 SEAGULL DRIVE, #104 PALM HARBOR, FL 34685 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2418 Rosehaven Drive Wesley Chapel, FL 33544
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: Sharon Sobotik		9-17-2004 262-893-0861	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	