

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000129593

Entity Name: MOLIFT, INC.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

5008 W LINEBAUGH AVE STE 60
TAMPA, FL 33624

New Principal Place of Business:

8406 BENJAMIN ROAD
SUITE C
TAMPA, FL 33634

Current Mailing Address:

5008 W LINEBAUGH AVE STE 60
TAMPA, FL 33624

New Mailing Address:

8406 BENJAMIN ROAD
SUITE C
TAMPA, FL 33634

FEI Number: 20-0383173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLURE, FREDRICK H.L.
100 N. TAMPA STREET, SUITE 2200
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: FARSTAD, GEIR O
Address: 5008 W LINEBAUGH AVE STE 60
City-St-Zip: TAMPA, FL 33624

Title: ST () Delete
Name: SLOMAN, DOROTHY
Address: 5008 W LINEBAUGH AVE STE 60
City-St-Zip: TAMPA, FL 33624

Title: P () Delete
Name: WIEGAND, REINHART
Address: 5008 W LINEBAUGH AVE STE 60
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: FARSTAD, GEIR O
Address: 8406 BENJAMIN ROAD SUITE C
City-St-Zip: TAMPA, FL 33634

Title: ST (X) Change () Addition
Name: SLOMAN, DOROTHY
Address: 8406 BENJAMIN ROAD SUITE C
City-St-Zip: TAMPA, FL 33634

Title: P (X) Change () Addition
Name: WIEGAND, REINHART
Address: 8406 BENJAMIN ROAD SUITE C
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify 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: DOROTHY SLOMAN

ST

01/19/2009

Electronic Signature of Signing Officer or Director

Date