

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000012128

FILED
Jun 27, 2005
Secretary of State

Entity Name: MO FAMILY, INC.

Current Principal Place of Business:

19800 SW 180TH AVENUE #95
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

19800 SW 180TH AVENUE #95
MIAMI, FL 33187

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADRUGA, MIRIAM
46 NW 125TH AVENUE
MIAMI, FL 33182 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MADRUGA, MIRIAM
Address: 46 NW 125TH AVENUE
City-St-Zip: MIAMI, FL 33182

Title: V () Delete
Name: INTAGLIATA, MARIA
Address: 6185 PLAINS DRIVE
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: NUNEZ, OCTAVIO
Address: 4714 WINDFLOWER CIRCLE
City-St-Zip: TAMPA, FL 336241175

Title: D () Delete
Name: NUNEZ, OSCAR
Address: 10380 NE HWY 314
City-St-Zip: SILVER SPRINGS, FL 34488

Title: D () Delete
Name: NUNEZ, ONEL
Address: 4128 SW 102ND LANE ROAD
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MIRIAM MADRUGA

P

06/27/2005

Electronic Signature of Signing Officer or Director

_____ Date