2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000050894

Entity Name: MOTI LAND INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5540 SW 8 STREET 5536 SW 8 STREET

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

5540 SW 8 STREET 5536 SW 8 STREET

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 20-0898223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANDMAN, ABRAHAM 5540 SW 8 STREET LANDMAN, ABRAHAM 5540 SW 8 STREET

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: ABRAHAM LANDMAN 01/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

CORAL GABLES, FL 33134

CORAL GABLES, FL 33134

OFFICERS AND DIRECTORS:

 Title:
 P/D
 () Delete

 Name:
 WEISSELBERGER, SONIA

 Address:
 5540 SW 8 STREET

Title: VP/D () Delete Name: LANDMAN, ABRAHAM

City-St-Zip:

City-St-Zip:

Address: 5540 SW 8 STREET
City-St-Zip: CORAL GABLES, FL 33134

 Title:
 S/D
 () Delete

 Name:
 LANDMAN, MICHAEL

 Address:
 5540 SW 8 STREET

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/D
 (X) Change () Addition

 Name:
 WEISSELBERGER, SONIA

 Address:
 5536 SW 8 STREET

 City-St-Zip:
 CORAL GABLES, FL 33134

Title: VP/D (X) Change () Addition

 Name:
 LANDMAN, ABRAHAM

 Address:
 5536 SW 8 STREET

 City-St-Zip:
 CORAL GABLES, FL 33134

Title: S/D (X) Change () Addition

Name: LANDMAN, MICHAEL
Address: 5536 SW 8 STREET
City-St-Zip: CORAL GABLES, FL 33134

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: SONIA WEISSELBERGER P/D 01/05/2005