
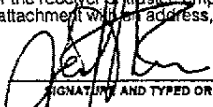


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000134398		
1. Entity Name MOGI CORPORATION		
Principal Place of Business 6220 PETERS ROAD PLANTATION, FL 33317		Mailing Address 6220 PETERS ROAD PLANTATION, FL 33317
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent MATAMOROS, LEONEL 6220 PETERS ROAD PLANTATION, FL 33317		DO NOT WRITE IN THIS SPACE
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 _____ <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 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE	P	
NAME	MATAMOROS, LEONEL	
STREET ADDRESS	6220 PETERS ROAD	
CITY-ST-ZIP	PLANTATION, FL 33317	
TITLE	V	
NAME	MATAMOROS, SAHILY	
STREET ADDRESS	6220 PETERS ROAD	
CITY-ST-ZIP	PLANTATION, FL 33317	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 		Date: 1/20/07 Daytime Phone #: 954-316-9766



01202007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1665481

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

1/20/07

02/01/07-80025-007 150.00