

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000007540

Entity Name: MOJO ENTERTAINMENT, INC.

FILED
Feb 26, 2008
Secretary of State

Current Principal Place of Business:

C/O ALAN R. SIMON
8295 N. MILITARY TRAIL SUITE C
PALM BCH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

C/O ALAN SIMON
8295 N. MILITARY TRAIL
PALM BCH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 65-1241058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, ALAN R
8295 N. MILITARY TRAIL
SUITE C
PALM BEACH GARDENS, FL 33410 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: DPST () Delete
Name: SIMON, ALAN
Address: 8295 N. MILITARY TRAIL SUITE C
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP () Change (X) Addition
Name: MOSLER, JACOB
Address: 2321 SE MELALEUCA BLVD
City-St-Zip: PORT ST LUCIE, FL 34953 US

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: ALAN R SIMON

DPST

02/26/2008

Electronic Signature of Signing Officer or Director

Date