

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050291

Entity Name: MOCATAJ INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

19195 NE 36 COURT
2705
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

19195 NE 36 COURT
2705
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 20-4118383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALANTE, MOISE
19195 NE 36 COURT
2705
AVENTURA, FL 33180 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: DP () Delete
Name: GALANTE, MOISE
Address: 19195 NE 36 COURT, SUITE 2705
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP () Delete
Name: GALANTE, CARMEN
Address: 19195 NE 36 COURT, SUITE 2705
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP () Delete
Name: GALANTE, ALBERT
Address: 19195 NE 36 COURT, SUITE 2705
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP () Delete
Name: MUSSALI, TANIA
Address: 19195 NE 36 COURT, SUITE 2705
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP () Delete
Name: GALANTE, JOSEPH
Address: 19195 NE 36 COURT, SUITE 2705
City-St-Zip: AVENTURA, FL 33180 US

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 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: ALBERT GALANTE

DVP

02/19/2009

Electronic Signature of Signing Officer or Director

Date