

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 8:00 am
Secretary of State

06-13-2006 90001 046 ***150.00

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|--|--|---|--|--|--|
| DOCUMENT # P05000130038 1. Entity Name MOTTAS ENTERPRISES INC. | | | | | |
| Principal Place of Business 7563 PHILLIPS HIGHWAY, BLD 300 SUITE 302 JACKSONVILLE, FL 32256 | | | Mailing Address 2951 MERRILL BLVD JACKSONVILLE BEACH, FL 32250 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | | <div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">66021510</div> <div style="margin-top: 10px;"> 05032006 Chg-P CR2E034 (11/05) </div> | |
| City & State | | City & State | | | |
| Zip Country | | Zip Country | | | |
| 4. FEI Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">13-4308652</div> | | Applied For <input type="checkbox"/> Not Applicable | | | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | <div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">66021510</div> <div style="margin-top: 10px;"> 05032006 Chg-P CR2E034 (11/05) </div> | |
| 6. Name and Address of Current Registered Agent | | | | | |
| MOTTAS, CHRISTIAN T 2951 MERRILL BLVD JACKSONVILLE BEACH, FL 32250 | | | | | |
| 7. Name and Address of New Registered Agent | | | | | |
| 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: <u><i>Chris Mottas</i></u> DATE: <u>5-31-06</u> <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 Due by September 8, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. | | | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 10. OFFICERS AND DIRECTORS </div> <div style="width: 45%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 </div> </div> | | | | | |
| TITLE: P <input type="checkbox"/> Delete NAME: MOTTAS, CHRISTIAN T STREET ADDRESS: 2951 MERRILL BLVD CITY-ST-ZIP: JACKSONVILLE BEACH, FL 32250 | | | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP: | | |
| TITLE: P <input type="checkbox"/> Delete NAME: MOTTAS, LUCY A STREET ADDRESS: 2951 MERRILL BLVD CITY-ST-ZIP: JACKSONVILLE BEACH, FL 32250 | | | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP: | | |
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| 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: <u><i>Chris Mottas</i></u> DATE: <u>7-5-06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |