2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000158846

Entity Name: MOORE FOR LESS, INC.

FILED Apr 30, 2007 Secretary of State

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

1734 MAJESTIC OAK DR. 36720 BARRINGTON DR. APOPKA, FL 32712 US EUSTIS, FL 32736 US

Current Mailing Address: New Mailing Address:

1734 MAJESTIC OAK DR.
APOPKA, FL 32712 US
36720 BARRINGTON DR.
EUSTIS, FL 32736 US

FEI Number: 84-1695786 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:

WALCOTT, ENRIQUE D
1734 MAJESTIC OAK DR
APOPKA, FL 32712 US
WALCOTT, ENRIQUE D
36720 BARRINGTON DR.
EUSTIS, FL 32736 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: ENRIQUE D. WALCOTT 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: WALCOTT, ENRIQUE D
Address: 1734 MAJESTIC OAK DR
Address: 36720 BARRINGTON DR.

 City-St-Zip:
 APOPKA, FL 32712 US
 City-St-Zip:
 EUSTIS, FL 32736 US

 Title:
 VP () Delete
 Title:
 VP (X) Change () Addition

 Title:
 VP
 () Delete
 Title:
 VP
 (X) Change

 Name:
 WALCOTT, PATRICIA
 Name:
 WALCOTT, PATRICIA

 Address:
 1734 MAJESTIC OAK DR.
 Address:
 36720 BARRINGTON DR.

 City-St-Zip:
 APOPKA, FL 32712 US
 City-St-Zip:
 EUSTIS, FL 32736 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 MOORE, SHAREECE
 Name:
 MOORE, SHAREECE

 Address:
 1734 MAJESTIC OAK DR.
 Address:
 36720 BARRINGTON DR.

 City-St-Zip:
 APOPKA, FL 32712 US
 City-St-Zip:
 EUSTIS, FL 32736 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: ENRIQUE D. WALCOTT P 04/30/2007