

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077828

Entity Name: MOBE, INC.

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

501 SOUTH STATE RD. 7
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

501 SOUTH STATE RD. 7
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 20-4989164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEINBERG, HOWARD A
1720 HARRISON STREET
SUITE 7B
HOLLYWOOD, FL 33020 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: P () Delete
Name: BECKER, MICHAEL
Address: 21055 YACHT CLUB DRIVE APT. 1709
City-St-Zip: AVENTURA, FL 33180

Title: P () Delete
Name: MORO, JOSEPH
Address: 330 SW 167TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VP () Delete
Name: BECKER, JOSHUA
Address: 19501 W. COUNTRY CLUB DRIVE APT.913
City-St-Zip: AVENTURA, FL 33180

Title: TREA () Delete
Name: MORO, KELLY
Address: 330 SW 167TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33027

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH MORO

P

04/23/2007

Electronic Signature of Signing Officer or Director

Date