

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000020881

FILED
Mar 26, 2009
Secretary of State

Entity Name: MONEYONE FINANCIAL MARKETS, CORP.

Current Principal Place of Business:

2100 PONCE DE LEON BLVD
111
CORAL GABLES, FL 3134

Current Mailing Address:

2100 PONCE DE LEON BLVD
111
CORAL GABLES, FL 3134

New Principal Place of Business:

2100 PONCE DE LEON BLVD
111
CORAL GABLES, FL 33134

New Mailing Address:

2100 PONCE DE LEON BLVD
111
CORAL GABLES, FL 33134

FEI Number: 20-8734470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOURA, IVONEA C
1541 BRICKELL AVE
APT. 1401
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

MOURA, IVONEA C
2127 BRICKELL AVE
APT. 2302
MIAMI, FL 33129 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: IVONEA C. MOURA

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOURA, DELMO
Address: 1541 BRICKELL AVE APT 1401
City-St-Zip: MIAMI, FL 33129

Title: VPS () Delete
Name: MOURA, IVONEA C
Address: 1541 BRICKELL AVE APT 1401
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOURA, DELMO
Address: 2127 BRICKELL AVE APT 2302
City-St-Zip: MIAMI, FL 33129

Title: VPS (X) Change () Addition
Name: MOURA, IVONEA C
Address: 2127 BRICKELL AVE APT 2302
City-St-Zip: MIAMI, FL 33129

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: IVONEA C. MOURA

MRS.

03/26/2009

Electronic Signature of Signing Officer or Director

Date