

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000097501

**FILED**  
**Mar 15, 2012**  
**Secretary of State**

**Entity Name:** MOFORIBALE BOTANICA INC

**Current Principal Place of Business:**

3260 W. HILLSBOROUGH AVE. STE 106  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

3260 W. HILLSBOROUGH AVE. STE 106  
TAMPA, FL 33614 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RODRIGUEZ, LEONARDO  
3260 W HILLSBOROUGH AVE  
106  
TAMPA, FL 33614 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RODRIGUEZ, LEONARDO  
Address: 4514 KNOLLWOOD AVE  
City-St-Zip: TAMPA, FL 33614 US

Title: VP  
Name: ENCISO, AIDA  
Address: 4514 KNOLLWOOD AVE  
City-St-Zip: TAMPA, FL 33614 US

I hereby 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 all other like empowered.

SIGNATURE: LEONARDO RODRIGUEZ

P

03/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date