## **2004 FOR PROFIT CORPORATION** ANNUAL REPORT

## Apr 13, 2004 8:00 am Secretary of State **DOCUMENT # P94000054291** 04-13-2004 90324 001 \*\*\*300.00 MOSHAN MANAGEMENT, INC. For a Children Car. Principal Place of Business Mailing Address DOSTIONA 9530 NORTH TRASK 9530 NORTH TRASK TAMPA, FL 33624 **TAMPA, FL 33624** (4.00 物版 - 36.19 8.30 (07) ( 7 ) 36.05 ( 13 ( ) 16 ( ) 16 ( ) - 8.07 ( ) 16 ( ) 10 ( ) 17 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02032004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3254490 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <sup>Name</sup> Lansky, Glen P.L. MODZELEWSKI, HENRY Street Address (P.O. Box Number is Not Acceptable) 9530 NORTH TRASK TAMPA, FL 33624 137 South Parsons Avenue City Zip Code 3351 Brandon 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS OF THE TAXABLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE ☐ Addition MODZELEWSKI, HENRY NAME ---STREET ADDRESS 9530 NORTH TRASK STREET ADDRESS) CITY-ST-ZIP TAMPA, FL 33624 CITY-ST-7IP Delete TITLE Change Addition | P SHANK, DAVID 9530 NORTH TRASK STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33624 COY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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. res. **SIGNATURE:** Daytime Phone #

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2004 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # P94000054291** 1, Ently home MOSHAN MANAGEMENT, INC. CC411507

| melpai Place<br>9330 NORTH<br>IMPA, FL 3 | TRASK  | Moling Address<br>9530 NORTH TRASK<br>TAMPA, FL. 33624  |                                 |                                     |   |  |   |                               |   |
|--|--|---|---------------------------------|-------------------------------------|---|--|---|-------------------------------|---|
| Principal Place of Business              |  | a. Assiing Address  |                                 |                                     |   | <b>THEFT</b>   |   |                               |   |
| Suite. Apr. 4. etc.                      |  | Sulje, Apt. #, etc.   |                                 |                                     | 02092004 Chg-F CR2ED:4 (10/05)                        |  |   |                               |   |
| City & State                             |  | City & State  |                                 |                                     | 4. FEI Number<br>59-3254490                           |  |   | Applied For<br>Not Applicable |   |
| Zφ                                       | Country  | Zφ  | Country                         |                                     |   | of Status Desired  |   | 8.75 Add                      |   |
| <del></del>                              | 6. Name and Address of Curren  | 1 Registered Agents   | -                               |                                     | 7. Plama and  | Address of New P   | legistered :                                  | pert.                         |   |
|  |  |   | Marna<br>Lans                   | kv.                                 | Glen I  | P.L.   |   |                               |   |
|  | WSKI, HENRY<br>[H TRASK  | <del> </del>  |                                 |                                     |   | er is Not Acceptabl  | e)  |                               |   |
| TAMPA, FL                                |  |   | 137                             | Sout                                | th Par  | sons Ave   | nue   |                               |   |
| 1  |  |   | CITY                            |                                     |   |  | FL  | Zip Coo                       | <u> </u>                                |
| The above                                | named entity submits this statement  | for the surnose of charteing It   | Bran<br>segistered office or    | registere                           | agent, or bo  | th, in the State of F  | olida. I am                                   | iniliar with.                 | _                                       |
| the obtiget                              | one of registered agent.   | ~ /   | •                               | -                                   |   | 4)   | 510   | 4                             |   |
| BIGNATURE_                               | Change had a selection of regions of age   | PL STORE OF THE PERSON OF THE | IT: Hagarrie Agest ağısını      | Pa (100,4100)                       | MEN POPER CENTS                                       |  | DATE  |                               |   |
| FILL<br>Affine Ma                        | i nown: Fill is \$150.60<br>by 1, 2004 Fee will be \$556   | 8. Election Camp.<br>Trest Fund Cor   |                                 |                                     | DO May Be<br>id to Fees                               |  |   |                               |   |
| 10.                                      |  | O DIRECTORS   | 11.                             |                                     | ADDITIONS   | /CHANGES TO OR   | FICERS AND                                    | DIRECTOR                      | Males                                   |
| SULLA NOOMER<br>NOOME<br>TAIT            | D<br>MODZELEWSKI, HENRY<br>9630 NORTH TRASK  | 25 Deter  | HAPTE<br>MART<br>PARTE MODULEST |                                     |   |  |   | C) craises                    |   |
| 214-21-22                                | TAMPA, FL 33624  | ☐ Carleto   | द्वाप-डा-रक<br>साथ              |                                     |   | -  |   | (Z) Change                    | ☐ Additio                               |
| TILE<br>NORME                            | SHANK, DAVID   | L2 Open   | MEME                            | P                                   |   |  |   |                               |   |
| STREET ADDRESS                           | 9630 NORTH TRASK   |   | STREET ADDRESS                  |                                     |   |  |   |                               |   |
| 17-21-2F                                 | TAMPA, FL 53824  |   | OTY-57-20°                      |                                     |   |  |   | -                             | Modi                                    |
| MOVE<br>MOVE                             |  | ☐ Delete  | TITLE<br>MANE                   |                                     |   |  |   | ☐ Crenge                      | () Mail                                 |
| STREET ADDRESS                           |  |   | STREET ADDRESS                  |                                     |   |  |   |                               |   |
| 214-51-BP                                |  |   | សាវ-ព-ខា                        |                                     |   |  |   | · <u></u>                     |   |
| म्रोधः                                   |  | ☐ Deteta  | TITLE<br>NAME                   | l                                   |   |  |   | C Custode                     | Astrio                                  |
| HYVE<br>Bijaset modresb                  |  |   | STREET ADDRESS                  |                                     |   |  |   |                               |   |
| เก๋า-ธา-ฮะ                               |  |   | CIT-SI-D                        |                                     |   |  |   |                               |   |
| me -                                     |  | Delete  | TIBLE                           |                                     | -   |  |   | Canak                         | ☐ Aecili                                |
| NOÓMÉ<br>STÓRET ADDRECS                  |  |   | HISHET ACCORDED                 |                                     |   |  |   |                               |   |
| CIA-21-54                                | :  |   | C711-61-20                      |                                     |   |  |   |                               |   |
| IIILE                                    |  | ☐ Delate  | RITLE                           |                                     |   |  |   | D Change                      | Addition 1                              |
| ndyme<br>Stydet i address                |  |   | HAME<br>SYREE ACCRESS           |                                     |   |  |   |                               |   |
| 514-21-156<br>2465 1 10011527            |  |   | CIY-SI-IP                       | 1                                   |   |  |   |                               |   |
| 12. I hereby<br>indicated<br>of the co   | certify that the Information supplied viet fine report or suppliemental report or position or the receiver or statute en or on an attorned this on address | eth tris filing does not qualify it<br>he true and accurate and the<br>oppowers to guessie this rape  |                                 | ted in 6e<br>ave the a<br>speak 607 | ction 119.07(3<br>prine legel effe<br>, Florida Statu | (i), Floride Statutes<br>let as II made under<br>les: and that my ne | , I further co<br>routh: that I<br>ne appears | fy that the i                 | nformation<br>or director<br>r Block 11 |
| ( Changod                                | . पर प्राप्त <b>का कार्यप्रदानामध्युर कार्</b> ग <u>वत</u> क्रेप्टेशक  | a, vigyal også lita openhale  | KG.                             |                                     |   | 4/05/28  |   |                               |   |