

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

PROVED
AND
FILED

-1 AM 9:35

STATE
OF FLORIDA

DOCUMENT # P94000060299

1. Corporation Name

MR. MOBILE INC.

Principal Place of Business

2123 WILLOW LAUREN LANE
WINDERMERE, FL 34786

Mailing Address

2123 WILLOW LAUREN LANE
WINDERMERE, FL 34786

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/16/1994	3a. Date of Last Report
4. FEI Number 59-3261288	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.02, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	25 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 County	29 County
25	30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BALLETTA, JAMES 215 NO. EOLA DRIVE ORLANDO, FL 32801	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

James Balletta

(NOTE: Registered Agent signature required when registering)

(DAY)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D	1.1 TITLE	P/S/T
NAME	GUPTA, STEVEN	1.2 NAME	GUPTA, STEVEN
STREET ADDRESS	2123 WILLOW LAUREN LANE	1.3 STREET ADDRESS	2123 WILLOW LAUREN LANE
CITY - ST - ZIP	WINDERMERE, FL 34786	1.4 CITY - ST - ZIP	WINDERMERE, FL 34786
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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****200.00 ****200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if my name appears on the report. I am an officer or director of the corporation or the receiver or trustee empowered to conduct this report as required by Chapter 121, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Steven Gupta STEVEN GUPTA, PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR