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CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

SIGNATURE: \

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIVISION OF CORPORATIONS P95000037927 (7) DOCUMENT # Corporation Name MOSHER INTERNATIONAL, INC. Principal Place of Business Mailing Address C/O ACCOUNTING AND BUSINESS CONSULTANTS C/O ACCOUNTING AND BUSINESS CONSULTANTS 700 E. BROWARD BLVD.: SUITE 302 790 E. BROWARD BLVD., SUITE 302 -ET. LAUDERDALE FL 00001 FT. LAUDERDALE FL 33301 3. Date Incorporated or Qualified 3a. Date of Last Report 05/12/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 7670 SW 48th Ct. 26 65-0579696 Not Applicable Suite, Apt. #, etc. Suite Ant # etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Miami, Fl 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199,032. 33143 25 USA 29 Florida Statutes XX Yes □ No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MOSHER, VICTOR Street Address (P.O. Box Number is Not Acceptable) 82 7670 S.W. 48TH COURT **MIAMI FL 33143 R3** City Zip Code 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and tribut applicable (NOTE: Registered Agent signature required which renstating) DATE CR2E034 (12/95) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1. 1 DILE MOSHER, VICTOR NAME 1.2 NAME 7670 S.W. 48TH COURT STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33143** CITY-ST-ZIP 1.4 CITY - ST - 712 TITLE DELETE 2 1 WILE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7P 2 4 CITY - ST - 7IP □ DELETE ☐ Change TITLE 3 1 TITLE ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STHEET ADDRESS CITY - ST - ZIF 3.4 CHTY - ST - ZIP DELETE Addition ☐ Change TITLE 4.3 TITLE NAME 4.2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY - ST - ZIP 4 4 CITY - ST- ZIP THILE DELETE Change 5 1 TillE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST- ZIP DELETE THLE 6 1 TITLE ☐☐ Channe ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS CHTY - ST - ZIP 6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Soction 119.07(3)(k), 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 made under oath; that I am an officer or director of the corporation or the receiver intested empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 14 or Block 14 or Block 15 or B

12-23-10 Doubling Phone A