FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000069433 (

MOHO CO., INC.

FILED Apr 07 1998 8:00am Secretary of State

Principal Place of Business Mailing Address			- 1 (001100) (40)DIA 0141 0441 0441 0044 0014	3 8664 1844 84983 (1189 1644 684)	
1250 LINCOLN RD #304 1250 LINCOLN RD #304					
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139		DO NOT WRITE IN TI	HIS SPACE		
			3. Date Incorporated or Qualified	TIIS SPACE	
			08/20/1996		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
	26		65-0690018	Not Applicable	
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State	City & State		<u> </u>	Fee Required	
 	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Gountry		untry	8. This corporation owes or has paid the		
24 25	29 30		Personal Property Tax due June 30.	Yes No	
9. Name and Address of Current Ro	egistered Agent		10. Name and Address of New Registe	red Agent	
INCORPORATORS PLUS, INC. 81 Name Mary Denise Lunsford					
1214 N. UNIVERSITY DRIVE 82 Street Address			ess (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33322			20 Lincoln Road, #	304	
		83			
		84 City	ami Beach	FL 85 Zip Code 33139	
44 Purculant to the provisions of Sections 607.00002 or	od 607 1509 Florida Statutae, the r	hove named core	ami Beach	FL 33 39	
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 on the State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. Lamplamiliar with, and accept the obligations of Section 607.0505, Florida Statutes.					
1 1100	\hookrightarrow I	atutes.	a	1,100	
SIGNATURE Signature of the proof transacting size of agest and	Must Old (NOTE Register	ed Agent signature require	id when reinstating) DA	[1/98	
12. OF FICERS AND D			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change	
TITLE VT	DELETE 1,17	FITLE		Change Addition	
NAME HOSANG, STEPHEN	f	NAME		34	
STREET ADDRESS 657 COLLING AVENUE #7		STREET ADDRESS 12	se Lincoln Road, #30	04	
CITY-ST-ZIP MIAMI BEACH FL			iami Beach, FL 33	139 S	
1	•	1		Change Addition	
	f	NAME Street address 12	ea linear Road #30	14	
STREET ADDRESS 1057 COLLING AVENUE #7-		CITY-ST-ZIP	50 Lincdn Road, #30 iami Beach, FL 33	120	
TITLE		TITLE	iomi seach, FL 33	Change Addition	
NAME	-	NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP	3.4.	CITY-ST-ZIP			
TITLE	· · · · · · · · · · · · · · · · · · ·	ISTLE		Change Addition	
NAME	4 2	NAME		ľ	
STREET ADORESS	4.3 \$	STREET ADDRESS			
CITY-S1-ZIP		CITY-ST-ZIP			
TITLE	DELETE 5.11	TITLE		Change Addition	
NAME	5.21	NAME			
STREET ADDRESS	5.3 9	STREET ADDRESS		j	
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE		TITLE		Change Addition	
NAME	·	NAME			
STREET ADDRESS		STREET ADDRESS		ł	
CITY-ST-ZIP		CITY-ST-ZIP	Section 119 07(3)(i) Florida Statutes Lifurth		

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this enhant report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver or frustee empowered of execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 12 or Block 13 if changed, or on an attaching it with an address.

SIGNATURE:

AND TYPES OF PRINTED HAME OF SERVING AFFICER ON ORESTOR

3/1/98 (305)674-9400