

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000094892

FILED
Apr 29, 2004
Secretary of State

Entity Name: MO VENTURES, INC.

Current Principal Place of Business:

636 W NEW YORK AVE
DELAND, FL 32720

New Principal Place of Business:

636 WEST NEW YORK AVE.
DELAND, FL 32720

Current Mailing Address:

115 E PLYMOUTH
DELAND, FL 32724

New Mailing Address:

FEI Number: 59-3409692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYER, JEFFREY L
636 W NEW YORK AVE
DELAND, FL 32720 US

Name and Address of New Registered Agent:

MOYER, JEFFREY L
115 EAST PLYMOUTH AVE.
DELAND, FL 32724 US

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:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: MOYER, RONNY L
Address: 514 N. FLORIDA AVE.
City-St-Zip: DELAND, FL 32720

Title: P () Delete
Name: MOYER, JEFFREY
Address: 702 EASTOVER CIRCLE
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JEFFREY L. MOYER

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date