## 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** #

P97000019173 (8)

MOEMEL, INC.

**FILED** Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
C/O JAMES V. ALBO 2020 N.E. 163RD ST. #300 NORTH MIAMI BEACH FL 33162		C/O JAMES V. ALBO 2020 N.E. 163RD ST. #300 NORTH MIAMI BEACH FL 33162					
						DO NOT WRITE IN THIS SPACE	
					-	3. Date Incorporated or Qualified	
						02/28/1997	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number Applied For	$\Box$
21		26				65-0781069 Not Applical	ble
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired 38.75 Additional	
22		27				Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	l
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count	try		8. This corporation owes or has paid the current year Intangible	
24	25		30]			Personal Property Tax due June 30.	
9. Name and Address of Current Registered Agent				31	Name	To. Name and Address of New Registered Agent	$\dashv$
ALBO, JAMES V			*	of Rame			
	N.E. 163RD STREET	i		32	Street Addres	s (P.O. Box Number is Not Acceptable)	
NOF	RTH MIAMI BEACH FL 33162		-				
			la la	33			Ì
			8	34	City	85 Zip Code	ᅥ
					•	FL;	
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							
Signature, typed or printed name of registered agent and little if applicable (NOTE: Registe					signature required	when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	OFFICERS AND	DELETE	13.	r	<del></del>	Change Additions	lion
TITLE	1 '-			1.4 TITLE		E thange E Audit	
NAME JAFIF, MARCOS A STREET ADDRESS 18181 N.E. 31ST CT. #2109				1.2 NAME			
STREET ADDRESS	20	1.3 STREET ADDRESS		l l			
CITY-ST-ZIP				1.4 CITY-ST-ZIP		☐ Change ☐ Addii	tion
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NAME	JAFIF, TERESA PENHOS		3.2 NAM		200500	•	
STREET ADDRESS 18,181 N.E. 31ST CT. #2109 CITY-ST-ZIP NORTH MIAMI BEACH FL 33160			1	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP			- '
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STREET ADDRESS	NORTH MIAMI BEACH FL 3310	sn			DDRESS		
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TITLE		C VICEIL				ייין איניייטייטייטייטייטייטייטייטייטייטייטייטי	
NAME ATTEMPT ADDRESS			6.2 NAM		DDDECC		
STREET ADDRESS					DDRESS		
CITY-ST-ZIP  14. I hereby certify that the information supplied with this filing does not qualify for the				6.4 CITY-ST-ZIP		The data of the control of the contr	

indicated on this annual report or supplied with the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oather that I am an officer or director of the corporation or the repover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or the corporation with an address.

Pristident

7/22/58