

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2008 8:00 am
Secretary of State

02-22-2008 90010 035 ***150.00

DOCUMENT # P97000033403

1. Entity Name
MO-DATA, INC.



Principal Place of Business
300 SE 2ND ST.
8TH FL.
FORT LAUDERDALE, FL 33301

Mailing Address
300 SE 2ND ST.
8TH FL.
FORT LAUDERDALE, FL 33301

40029890



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01112008 Chg-P CR2E034 (12/06)

4. FEI Number
65-0746206

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JONES, PATRICIA
% STILES CORP.
300 SE 2ND ST.
FORT LAUDERDALE, FL 33301

Name
Robert Esposito
Street Address (P.O. Box Number is Not Acceptable)
Stiles Corporation
300 SE 2nd Street
City
Fort Lauderdale FL Zip Code
33301

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Robert Esposito

January 31, 2008

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VT
HERNANDEZ, TRESA
300 SE 2ND ST.
FORT LAUDERDALE, FL 33301 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
TIDWELL, CARRIE
300 SE 2ND ST.
FORT LAUDERDALE, FL 33301 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
STILES, TERRY W
300 SE 2ND ST.
FORT LAUDERDALE, FL 33301 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
FERRERA, ROCCO
300 SE 2ND ST.
FORT LAUDERDALE, FL 33301 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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CITY - ST - ZIP
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CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Terry W. Stiles January 31, 2008 954-627-9300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #