

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 30 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P97000066940 (2)

1. Corporation Name  
 MOMO SERVICE, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 3030 HAMPTON PLACE, BOCA RATON FL 33434  
 Mailing Address: 3030 HAMPTON PLACE, BOCA RATON FL 33434

3. Date Incorporated or Qualified: 08/01/1997

4. FEI Number: 65-0771076 Applied For: Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business: 21 19328 E. COUNTRY CLUB DR. Suite, Apt. #, etc. City & State: AVENTURA, FL Zip: 33180 Country: USA

2a. Mailing Address: 26 19328 E. COUNTRY CLUB DR. Suite, Apt. #, etc. City & State: AVENTURA, FL Zip: 33180 Country: USA

9. Name and Address of Current Registered Agent: MORGENSTERN, MOISES, 3030 HAMPTON PLACE, BOCA RATON FL 33434

10. Name and Address of New Registered Agent: 81 Name: MORGENSTERN, MOISES; 82 Street Address: 19328 E. COUNTRY CLUB DRIVE; 84 City: AVENTURA, FL; 85 Zip Code: 33180

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS         |                     | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                            |
|------------------------------------|---------------------|---|----------------------------|
| TITLE: D                           | MORGENSTERN, MOISES | 1.1 TITLE: D  | MORGENSTERN, MOISES        |
| NAME: MORGENSTERN, MOISES          | 3030 HAMPTON PLACE  | 1.2 NAME: MORGENSTERN, MOISES                         | 19328 E COUNTRY CLUB DRIVE |
| STREET ADDRESS: 3030 HAMPTON PLACE | BOCA RATON FL 33434 | 1.3 STREET ADDRESS: 19328 E COUNTRY CLUB DRIVE        | AVENTURA, FL 33180         |
| CITY-ST-ZIP: BOCA RATON FL 33434   |                     | 1.4 CITY-ST-ZIP: AVENTURA, FL 33180                   |                            |
| TITLE: D                           | VAINSTEIN, ANNY     | 2.1 TITLE: D  | VAINSTEIN, ANNY            |
| NAME: VAINSTEIN, ANNY              | 3030 HAMPTON PLACE  | 2.2 NAME: VAINSTEIN, ANNY                             | 20185 E COUNTRY CLUB DRIVE |
| STREET ADDRESS: 3030 HAMPTON PLACE | BOCA RATON FL 33434 | 2.3 STREET ADDRESS: 20185 E COUNTRY CLUB DRIVE        | AVENTURA, FL 33180         |
| CITY-ST-ZIP: BOCA RATON FL 33434   |                     | 2.4 CITY-ST-ZIP: AVENTURA, FL 33180                   |                            |
| TITLE:                             |                     | 3.1 TITLE:  |                            |
| NAME:                              |                     | 3.2 NAME:   |                            |
| STREET ADDRESS:                    |                     | 3.3 STREET ADDRESS:                                   |                            |
| CITY-ST-ZIP:                       |                     | 3.4 CITY-ST-ZIP:                                      |                            |
| TITLE:                             |                     | 4.1 TITLE:  |                            |
| NAME:                              |                     | 4.2 NAME:   |                            |
| STREET ADDRESS:                    |                     | 4.3 STREET ADDRESS:                                   |                            |
| CITY-ST-ZIP:                       |                     | 4.4 CITY-ST-ZIP:                                      |                            |
| TITLE:                             |                     | 5.1 TITLE:  |                            |
| NAME:                              |                     | 5.2 NAME:   |                            |
| STREET ADDRESS:                    |                     | 5.3 STREET ADDRESS:                                   |                            |
| CITY-ST-ZIP:                       |                     | 5.4 CITY-ST-ZIP:                                      |                            |
| TITLE:                             |                     | 6.1 TITLE:  |                            |
| NAME:                              |                     | 6.2 NAME:   |                            |
| STREET ADDRESS:                    |                     | 6.3 STREET ADDRESS:                                   |                            |
| CITY-ST-ZIP:                       |                     | 6.4 CITY-ST-ZIP:                                      |                            |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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 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 on an attachment with an address.

SIGNATURE: \_\_\_\_\_ DATE: SEPT 4 1998 (305) 931-0052

CR2E034 (5/98)