

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90102 008 ***150.00

DOCUMENT # P98000046973

1. Entity Name
MORAMON, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2750 Brickell Court
Suite, Apt. #, etc.

3. Mailing Address

2750 Brickell Court
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number

Apply for

Applied For

Not Applicable

Zip
33129

Country
USA

Zip
33129

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Rafael Mora

Street Address (P.O. Box Number is Not Acceptable)
2750 Brickell Court

City **Miami**

FL

Zip **33129**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	Rafael Mora	2750 Brickell Court	Miami, FL 33129
SD	Angela Montoya	2750 Brickell Court	Miami, FL 33129
AS	Marco E. Rojas	520 Brickell Key Drive 0-305	Miami, FL 33131

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other names empowered.

SIGNATURE:

Marco E. Rojas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)