2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000096253

1. Entity Name
MOLANO HOLDINGS UNO, INC.

Principal Place of Business	Mailing Address
1203 UNIVERSITY DR CORAL SPRINGS, FL 33071	1203 UNIVERSITY DR CORAL SPRINGS, FL 33071

44013737

DO NOT WRITE IN THIS SPACE

01142004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0875482	Not Applicable

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

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6. Name and Address of Current Registered Agent

MORANO, MARCO
4625 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

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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_____

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, 2004 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	MOLANO, MARCO
STREET ADDRESS	4625 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33071

TITLE	
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12. 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 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: _____ MARCO MOLANO _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #