

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # V56994

1. Entity Name
MO-TA, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 OCT 31 PM 1:20

Principal Place of Business
10155 COLLINS AVE
#601
BAL HARBOUR, FL 33154 US

Mailing Address
~~10155 COLLINS AVE~~
~~#601~~
~~BAL HARBOUR, FL 33154 US~~



2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
17700 SW 117TH ST RD
Suite, Apt. #, etc.

10252007 REIN-P CR2E098 (1/07)

City & State
DANNELLON, FLORIDA

Zip
34432

Country
USA

4. FEI Number
65-0356170

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
BOUSKELA, TANIA
10155 COLLINS AVE #601
BAL HARBOUR, FL 33154

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 January 1, 2008, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST BOUSKELA, TANIA 10155 COLLINS AVE #601 BAL HARBOUR, FL 33154	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	600112388256 11/16/07--01055--010 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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 person or persons 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: TANIA BOUSKELA - PRESIDENT 10/29/07 305-864-4666

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