2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000058705

1. Entity Name BLUE MOON VENTURES, LLC

FILED Mar 05, 2007 08:00 AN Secretary of State

Principal Place of Business

MIAML FL 33155

7201 S.W. 40TH STREET

Mailing Address

7201 S.W. 40TH STREET MAMI, FL 33155



DO NOT WRITE IN THIS SPACE

| 01172007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 51-0519767 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ONA, ALFREDO V 7201 S.W. 40TH STREET MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

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

Filing Fee is \$50.00 Due by May 1, 2007 U0000654850 03/13/07-80080-014 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ONA, ALFREDO V 7201 S.W. 40TH STREET MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ONA, HELGA W 7201 S.W. 40TH STREET MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-11P	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

Alfredo V. Ond

Date: 3/1/07