2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # L77647

1. Entity Name

FULL MOON CLEANERS, INC.

Principal Place of Business	Mailing Address
7885 NO FEDERAL HWY BOCA RATON FL 33487 US	7885 N FEDERAL HWY BOCA RATON FL 33487 US

2. Principal Place of Business: Same as above.
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address: Same as above
Suite, Apt. #, etc.
City & State
Zip | Country

1st MOORE CR2E034 (10/05)

4. FEI Number: 65-0200304 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BULSARA, JAYANTI H.
7885 N. FEDERAL HWY
BOCA RATON FL 33487

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 accep[t] the obligations of registered agent.

SIGNATURE: Jayanti Bulsara JAYANTI BULSARA 3/14/06
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, 2006 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May [Be] Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	BULSARA, JAYANTI H	
STREET ADDRESS	7885 N FEDERAL HWY	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	☐ Delete
NAME	BULSARA, PURNIMA J	
STREET ADDRESS	7885 N FEDERAL HWY	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS	U00000463421	
CITY-ST-ZIP	03/25/06-80028-014 150.00	
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Add
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the informati[on] 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 dire[ctor] 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: Jayanti Bulsara JAYANTI BULSARA 3/14/06