# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

#### Jul 12, 2006 8:00 am Secretary of State 07-12-2006 90003 013 \*\*\*150.00 **DOCUMENT #516704** 1. Entity Name PAPER MOON, INC. 40020000 Mailing Address Principal Place of Business POLO GROUNDS MALL POLO GROUNDS MALL 944 S. MILITARY TRAIL 944 S. MILITARY TRAIL WEST PALM BCH, FL 33415 WEST PALM BCH, FL 33415 07072006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1696498 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YANCEY, HENRY B. DO NOT WRITE 1413 N.E. 56TH COURT FT. LAUDERDALE, FL 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 register SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 OFFICERS AND DIRECTORS 10. THLE NAME YANCEY, HENRY B 1413 NE 56TH COURT STREET ADDRESS CITY - ST - ZIP FT LAUDERDALE, FL VD YANCEY FLIZABETH G NAME 1413 NE 56TH COURT STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL TITLE NAME YANCEY, STEPHEN 5648 GREEN ISLAND RD STREET ADDRESS DO NOT WRITE CITY ST ZIP LAKE WORTH, FL 334637393 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby 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 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.

STREE! ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

www.sunbiz.org

## **Sunbiz E-file Account Application**

Account Name:	PADER MOON TO INC
E-mail Address:	poper moon @ Bellsouth inet.
Mailing Address:	944 South Mil. Th
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	1 - 1 1 1 21
City:	WesT ps/m Begoli State: Pl. Zip: 3341) - 561) LS4-2665 Fax: (561) LS4-4991
Phone: (	361) 67- 7-665 Fax: (361) 684-4992
	H.B. YANCEY
Contact Person:	TT.B. YENCY
<b>~</b> .	AB yoursey
Signature:	Hor young
	CKICTY
Password:	
( n	inimum length - 4 characters, maximum 12 characters)

\*\*\* An account number will be E-mailed to you as soon as the application is processed \*\*\*

### **Mailing Address**

Division of Corporations Public Access Accounts P.O. Box 6327 Tallahassee, FL 32314

### **Courier Address**

Division of Corporations **Public Access Accounts** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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