2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048428

City-St-Zip: DIX HILLS, NY 11746

Entity Name: PALE MOON ESTATES LLC

FILED Jul 19, 2006 Secretary of State

Current P	rincipal Place of Business:	New Principal Pl	ace of Business:	
	•	ivew Fillicipal Fi	ace of Busiliess.	
	STREET STE #2 JRST, NY 11757			
Current Mailing Address:		New Mailing Add	New Mailing Address:	
	_	Now maning , tak		
	STREET STE #2 JRST, NY 11757			
FEI Number In accordan		I For() FEI Number Not Applicable() d liability company did not receive the prior r		
	Address of Current Registered		ss of New Registered Agent:	
4435 OLD	RGEXCELSIOR CORPORATE SEF WINTER GARDEN ROAD), FL 32811 US	RVICES, INC.		
	named entity submits this stateme e of Florida.	ent for the purpose of changing its regis	stered office or registered agent, or both	
SIGNATUI	RE:			
	Electronic Signature of Reg	istered Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES:	
Title:	MGRM () Delete	Title:	() Change () Addition	
Name:	STERLING, PETER	Name:		
Address:	11 RAEBURN COURT	Address:		
City-St-Zip:	BABYLON, NY 11702	City-St-Zip:		
Title:	MGRM () Delete	Title:	() Change () Addition	
Name:	ASFOUR, MICHAEL	Name:	, , , , , , , , , , , , , , , , , , , ,	
Address:	10 RED MAPLE LANE	Address:		

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DEBORAH STERLING MGR 07/19/2006