

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L13788

Entity Name: MOON-LAKE FOODS, INC.

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

HUNGRY HOWIES PIZZA & SUBS #188
9109 RIDGE ROAD
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

P O BOX 489
NEW PORT RICHEY, FL 346560489

New Mailing Address:

10040 DOE COURT
NEW PORT RICHEY, FL 34654

FEI Number: 59-2967223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, CHRISTOPHER A.
5711 WESTSHORE DR.
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

BELMONT, DOUGLAS
10040 DOE COURT
NEW PORT RICHEY, FL 34654 US

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.

SIGNATURE: DOUGLAS BELMONT

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, CHRISTOPHER A.
Address: 5711 WESTSHORE DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DV () Delete
Name: BELMONT, DOUGLAS
Address: 10040 DOE COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BELMONT, DOUGLAS
Address: 10040 DOE COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: SD (X) Change () Addition
Name: HAMILTON, KEVIN
Address: 5714 SAREN DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS BELMONT

PD

04/24/2009

Electronic Signature of Signing Officer or Director

Date