2002 UNIF	ORM	BUSINESS	REPORT	(UBR
OCLIMENT #		00000407	200	

DOCUMENT # P00000107203 L. Entity Name MOORE CREDIT CORPORATION							APPHOVED FILED 02 JUN 12 AM 8: 11			
Principal Place of Business 6289 W. SUNRISE BLVD STE 114 SUNRISE FL 33313			Mailing Address 6289 W. SUNRISE BLVD STE 114 SUNRISE FL 33313				SECRETARY OF PALLAHASSEE,	F STATE FLORIDA		
2. Principal Place of Business 3. Mailing Address							!	910 94 16) 1 90 60 11 0 16	i i i i i i i i i i i i i i i i i i i 	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN TH	IS SPACE		
City & State			City & State			4. 1	FEI Number 65-1053705		pplied For ot Applicable	
Zip		Country	Zip	Coun	try	5. (Certificate of Status Desired	\$8.75 Ad	ditional	
	6. Name	and Address of Current I	Registered Agent		í	7. !	Name and Address of New Registere			
					Name					
GARDNEF	=				Street A	ddress (P.O. E	Box Number is Not Acceptable)	T.118.1		
		LVD STE 114								
SUNRISE	FL 33313	^								
		~ 11			City FL Zip Code			le		
8. The above	named enti	subjinits this statement for	the purpose of changing its	registere	ed office or	registered ag	ent, or both, in the State of Florida.			
SIGNATURE	Signature, typed	or printed name diregistered agent a	A.A. nd title if applicable. (NOTE	: Registered	d Agent signat	ure required when re	einstating) DATI	/02		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After May 1, 2002 Make Check Payable			2 Fee	ee will be \$550.00 Trust Fund Contribution Added to			0 May Be d to Fees			
11.		OFFICERS AND I	***************************************	12.			DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR		
TITLE	D	0150	☐ Delete	TITLE		φ. <u>5</u> ,	<i>D</i> .	Change	Addition	
NAME STREET ADDRESS	MOORE, A			NAME		TAN	NGARDNER.	$\Omega_2 =$	#111	
CITY-ST-ZIP	SUNRISE	SUNRISE BLVD STE 114 FL 33313	•		ET ADDRESS -ST-ZIP	628	9 W. Sunlike	2 BU	111/	
TITLE	و. كم		☐ Delete	-	**	54	Arese PC.S.		[T] Addition	
NAME	TAN	GARDOTER	□ Delete	TITLE			400005820		Addition	
STREET ADDRESS	6289	W. SUNPIS	SE BLW#/14) STREE	ET ADDRESS		400005820 -06/18/02	ñ1075C	109 ⁼	
CITY-ST-ZIP	SULP	SE FLORISA	333/3	CITY-	-ST-ZIP		****150,00	****15	0.00	
TITLE			☐ Delete	TITLE				☐ Change	☐ Addition	
NAME				NAME						
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CITY-ST-ZIP				-	ST-ZIP					
TITLE NAME			☐ Delete	TITLE				Change	☐ Addition	

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE MID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/02 9.54-581-9659

June 6, 2002

TO:

Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

ATTN:

UBR

To Whom It May Concern:

Please excuse my delay in forwarding these returns. The excusable neglect was due to a change in bookkeepers and only today did we realize that the previous bookkeeper did not forward the returns as required. We only realized this after going through the desk, as we did not receive any follow-up notices. Please accept my apologies and my seven (7) filings.

Thanking you,

Yours truly,

lan Gardner

6289 W. Sunrise Blvd. Suite 114

Sunrise, FL 33313

(954) 581-9659