2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000024505

Entity Name
 MOORE CUISINE, INC.



FILED Mar 15, 2007 08:00 AM Secretary of State

Principal Place of Business

757 SE 17TH ST-#155 FORT LAUDERDALE, FL 33316 Mailing Address

C/O CEC CORPORATION 4817 NE 23RD AVE. FORT LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE

02252007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1082268

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOORE, ELLEN 757 SE 17TH STREET #155 FORT LAUDERDALE, FL 33316

DO NOT WRITE 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 registered agent.	

SIGNATURE.

10.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE, Registered Agent signature required when reinstating)

. . .

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, ELLEN 757 SE 17TH STREET, #155 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

OFFICERS AND DIRECTORS

U00000666760 03/26/07-80001-011 150.00

DATE

DO NOT WRITE IN THIS SPACE

12. I hereby 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 repeiver 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 attactyrient with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

ELLLEN ER OR DIRECTOR

y Mue 13, 2007