

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90093 013 ***150.00

DOCUMENT # P01000042473

1. Entity Name
MOON ROSE ENTERPRISES, INC.

Principal Place of Business

15343 SW 178 ST
 MIAMI FL 33187-7723

Mailing Address

15343 SW 178 ST
 MIAMI FL 33187-7723

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ACOSTA, MARIA E
15343 SW 178 ST
MIAMI FL 33187-7723

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS-\$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P
ACOSTA, MARIA E
15343 SW 178 ST
MIAMI FL 33187-7723
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P
Acosta, Jorge
15343 SW 178 ST
MIAMI, FL 33187-7723
 NO ☒ Change ☐ Addition
 changes *Acosta*

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
V
ACOSTA, JORGE
15343 SW 178 ST
MIAMI FL 33187-7723
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
V
Acosta, Maria E
15343 SW 178 ST
MIAMI, FL 33187-7723
 NO ☒ Change ☐ Addition
 changes *Acosta*

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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TITLE
 NAME
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 CITY-ST-ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing 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 trustee 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.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-9-02

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

P01000042473

September 09, 2002

980338

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

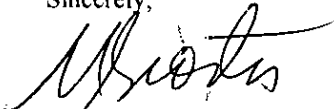
P.O Box 6327
Tallahassee, Florida 32314

This letter is written on behalf of MOON ROSE ENTERPRISES, INC., (P01000042473) in request of waiving the late fee, since the corporation did not receive the prior notice.

This letter is enclosed along with the completed report, as well as the original filing fee of \$150.00.

Thank you in advance for your cooperation.

Sincerely,



Marie Acosta
President