


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90981 015 \*\*\*150.00

<b>DOCUMENT # P04000013480</b>	
1. Entity Name <b>GERALD MOORE, INC.</b>	

Principal Place of Business <b>1080 99TH STREET #C32 BAY HARBOR, FL 33154</b>	Mailing Address <b>1080 99TH STREET #C32 BAY HARBOR, FL 33154</b>
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2. Principal Place of Business <b>5533 PACIFIC BLVD. #4203</b>	3. Mailing Address <b>5533 PACIFIC BLVD. #4203</b>
Suite, Apt. #, etc. <b>#4203</b>	Suite, Apt. #, etc. <b>#4203</b>
City & State <b>BOCA RATON, FL.</b>	City & State <b>BOCA RATON, FL.</b>
Zip <b>33433</b>	Country <b>USA</b>

01082005 Chg-P CR2E034 (10/03)

4. FEI Number <b>20-0752616</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent <b>MOORE, GERALD 1080 99TH STREET #C32 BAY HARBOR, FL 33154</b>	7. Name and Address of New Registered Agent Name <b>GERALD MOORE</b> Street Address (P.O. Box Number is Not Acceptable) <b>5533 PACIFIC BLVD. #4203</b> City <b>BOCA RATON</b> FL <b>33433</b>
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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 *Gerald Moore* DATE 4/27/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPTS MOORE, GERALD 1080 99TH STREET #C32 BAY HARBOR, FL 33154 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPTS MOORE, GERALD 5533 PACIFIC BLVD. #4203 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gerald V. Moore* DATE 4/27/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR