24/2004 09 Division of CPA PA 3055 orations Florida Department of State Division of Corporations Public Access System **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H04000111501 3))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. Tor Division of Corporations : (850)205-0380 Fax Number From: FILED Account Name : ISAAC MATZ P.A., C.P.A. Account Number : I20040000029 -D-M Phone : (305) 573-6640 : (305)675-6200 Fax Number 4, '310N DF CORPOF AT 10N2 04 HAY 214 AH 10: 32 J RECEIVEL **REGISTERED AGENT CHANGE** THE MOON GROUP-PLUS, CORP. Certificate of Status 0 **Certified** Copy 0 Page Count 01 Estimated Charge \$35.00 Electronic Filing Menu Public Access Heip **Corporate Filing**

4/2004	Ø9:28	3055736548	ISAAC MATZ CPA PA	PAGE 8	12
AUDIT N STATE	NUMBER	R: HOYOOOIIIS	COLO STERED OFFICE OR REGISTERED AGENT OF CORPORATIONS	R BOTH FOR	
Pursuant	to the prov	risions of sections 607.050)2, 617.0502, 607.1508, or 617.1508, Florida Statutes, th	is statement of	
			ed under the laws of the State ofElorida		•
to change	its registe	red office or registered ag	rent, or both, in the State of Florida.		
1. The na	me of the c	corporation: The Moon	Group-Plus, Corp.		
2. The pri	incipal offi	ce address: <u>2742 Bisca</u>	vne Blvd. Miami. FL 33137		
3. The ma	niling addr	ess (if different): 2742 B	iscavne Blvd, Miami, FL 33137		•
4. Date of	fincorpora	tion/qualification: 03-24	-04 Document number: P04000052392	· · · · · · · · · · · · · · · · · · ·	- ,
		eet address of the current r nt of State:	registered agent and registered office on file with the		
	Fe	elix J. Luna			
	.23	01 N 29 Ave # 21			
	H	allywood, FL 33020			
6. The nat (if char		eet address of the new regi	istered agent (if changed) and /or registered office	04 MAY 24 SEURETAR	
,	P	ablo Chiappero		Y 2L	Ē
	27	42 Biscayne Blvd		+ PH	FILED
		(P.O. B	ox or personal mailbox NOT acceptable)		<u> </u>
	M	iami, FL 33137			
The stree	t address of will be ide	of its registered office and intical.	I the street address of the business office of its register	ed agent, as	
Such cha the board	nge was a , or the co	uthorized by resolution di reportion has been notified $L = 1.77$	uly adopted by its board of directors or by an officer so ed in writing of the change.	authorized by	
	tet	70/	Pablo Chiappero Presiden	t	
I hereby a I further duties, an being file been noti	accept the agree to co in I am far in merciy I fied in write	appointment as registere omply with the provisions miliar with and accept the oreflect a change in the s ting of this change.	(Provise or types name as a agent and agree to act in this capacity, s of all statutes relative to the proper and complete per e obligation of my position as registered agent. Or, if t registered office address, I hereby confirm that the cor	-	
	tt	E/	5.24-01	1	
_	-73/5	sture of Registered Agent)	(Date)	,==`.``````````````````````````````	
If signing	y on behali	of an entity:			
<u></u>	с Л	ped or Printed Name)	(Capacity)		

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Prepared By: Isaac Matz, P.A., C.P.A. 2742 Discovné Bivd. Miami, FL 33137 Phone: (305) 573-8640 Fext (305) 675-8200

FAX AUDIT NUMBER: 4040001115013

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