

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000119967

Entity Name: BLU MOON MARKETING INC.

**FILED**  
**Sep 20, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

115 CONCORD DRIVE  
SUITE B  
CASSELBERRY, FL 32707 US

**New Principal Place of Business:**

**Current Mailing Address:**

115 CONCORD DRIVE  
SUITE B  
CASSELBERRY, FL 32707 US

**New Mailing Address:**

FEI Number: 20-1504641

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ANDREWS, GERARD D  
115 CONCORD DRIVE, SUITE B  
CASSELBERRY, FL 32707 US

**Name and Address of New Registered Agent:**

ENGEL, MELINDA  
1881 S. US HIGHWAY 17-92  
LONGWOOD, FL 32750 US

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.

SIGNATURE: MELINDA ENGEL

09/20/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ANDREWS, GERARD D  
Address: 115 CONCORD DRIVE, SUITE B  
City-St-Zip: CASSELBERRY, FL 32707 US

Title: VP (X) Delete  
Name: BROUSSEAU, PHILLIP J  
Address: 3456 BUFFAM PLACE  
City-St-Zip: CASSELBERRY, FL 32707 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID ANDREWS

P

09/20/2007

Electronic Signature of Signing Officer or Director

Date