2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117312

Entity Name: MOONLIGHT INNOVATIONS, INC.

FILED Jul 19, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6808 HANGING MOSS RD ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

6808 HANGING MOSS RD ORLANDO, FL 32807

FEI Number: 54-2189733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MATEO, LUZ M MATEO, LUZ M 5901 AÚGUSTA NATIONAL DR APT 108 5839 RÉD DAHLIA CT

ORLANDO, FL 32822 US US ORLANDO, FL 32807

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: LUZ M MATEO 07/19/2006

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MATEO, LUZ M MATEO, LUZ M Name: Name: 5901 AUGUSTA NATIONAL DR APT 108 Address: 5839 RED DAHLIA CT Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32807

Title: VΡ Title: () Change () Addition () Delete

LOPEZ, VERONICA Name: Name: 1340 TALL MAPLE LOOP Address: Address: OVIEDO, FL 32765 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition

MATEO, LUZ M Name: MATEO, LUZ M Name: 5901 AUGUSTA NATIONAL DR APT 108 5839 RED DAHLIA CT Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32807

Title: () Delete Title: () Change () Addition

LOPEZ, VERONICA Name: Name: Address: 1340 TALL MAPLE LOOP Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

VΡ SIGNATURE: VERONICA LOPEZ 07/19/2006