2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000095257

Entity Name: BLUE MOON USA, INC.

FILED Jun 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 200 SW FIRST AVENUE SUITE 820 FORT LAUDERDALE, FL 33301 **New Mailing Address: Current Mailing Address:** 200 SW FIRST AVENUE SUITE 820 FORT LAUDERDALE, FL 33301 FEI Number: 26-3652928 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: PIERSON, THOMAS F 8050 NORTH UNIVERSITY DRIVE SUITE 202 TAMARAC, FL 33321 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: 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: PRES Title: () Delete () Change () Addition POIGNANT, MICHEL Name: Name: 200 SW FIRST AVENUE, SUITE 820 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: Title: SEC Title: () Delete () Change () Addition Name: POIGNANT, MICHEL Name: 200 SW FIRST AVENUE, SUITE 820 Address: Address: FORT LAUDERDALE, FL 33301 City-St-Zip: City-St-Zip: Title: Title: DIR () Delete () Change () Addition POIGNANT, MICHEL Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MICHEL POIGNANT **PRES** 06/23/2009

200 SW FIRST AVENUE, SUITE 820

FORT LAUDERDALE, FL 33301

Address: City-St-Zip: