

2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
May 02, 2004
Secretary of State**

DOCUMENT# P93000040330

Entity Name: STARS AND MOON, INC.

Current Principal Place of Business:

13953 SW 66 STREET
#407
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

13953 SW 66TH STREET
#407
MIAMI, FL 33183

New Mailing Address:

FEI Number: 65-0498214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALOF, GREGORY E
13953 SW 66TH STREET
APT 407
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: KALOF, GREGORY E
Address: 13953 SW 66 STREET, #407
City-St-Zip: MIAMI, FL 33183

Title: TSD () Delete
Name: PEDRAZA, JUNTREE
Address: 1640 NW 10 AVENUE
City-St-Zip: MIAMI, FL 33030

Title: D () Delete
Name: KALOF, NATEE
Address: 1640 NW 10 AVE
City-St-Zip: HOMESTEAD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: GREGORY E. KALOF

PD

05/02/2004

Electronic Signature of Signing Officer or Director

_____ Date