

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JANET B. ROBERTSON
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000073129 (7)

THE NEW MOON SALOON, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 11:24

1. Principal Office Address		2. Mailing Address	
1202 SIMONTON ST KEY WEST FL 33040		1202 SIMONTON ST KEY WEST FL 33040	
3. Date of Incorporation		3a. Date of Last Report	
10/21/1993		11/28/1994	
4. FIC Number		Applied For	
65-0443873		Not Applicable	
5. Certificate of Status Located		\$8.75 Additional Fee Required	
6. Election Campaign Financing		\$5.00 May Be Added to Fees	
7. This corporation has liability for election law fines		Yes ☐ No ☐	
8. This corporation has liability for election law fines		Yes ☐ No ☐	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ECKSTEIN, ALAN 1407 LEON ST KEY WEST FL 33040			

11. Declaration of the Secretary of State	
I, the undersigned, being the Secretary of State of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the information filed with the Division of Corporations, and that the same is in accordance with the provisions of the Florida Statutes.	
12. OFFICERS AND DIRECTORS	
13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. NAME		1. NAME	
2. STREET ADDRESS		2. STREET ADDRESS	
3. CITY		3. CITY	
4. STATE		4. STATE	
5. ZIP		5. ZIP	
6. TITLE		6. TITLE	
7. DATE		7. DATE	
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14. I, the undersigned, do hereby certify that the information supplied with this filing is voluntarily furnished and that it is true and correct, and that the same is in accordance with the provisions of the Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and correct, and that the signatures shall have the same legal effect as if made under oath. If the information is changed for the purpose of this report, the report is subject to the provisions of the Florida Statutes, and that my name appears on Block 1 of this report, or on an attachment with an address.

SIGNATURE: *Alan Eckstein*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95