

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 08, 2001 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000033038**

1. Entity Name  
 THE MOON UNDER WATER, INC.

Principal Place of Business  
 105 4TH AVENUE NE  
 408  
 ST. PETERSBURG FL 33701 US

Mailing Address  
 105 4TH AVENUE NE  
 408  
 ST. PETERSBURG FL 33701 US

2. Principal Place of Business  
 3201 5TH AVENUE NORTH

3. Mailing Address  
 3201 5TH AVENUE NORTH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
 ST. PETERSBURG FL

City & State  
 ST. PETERSBURG FL

4. FEI Number  
**65-0508737**  
 Applied For   
 Not Applicable

Zip Country  
 33713 US

Zip Country  
 33713 US

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

LUCAS ALAN  
 105 4TH AVENUE N.E., #408  
 ST PETERSBURG FL 33701 US

Name  
 LUCAS ALAN  
 Street Address (P.O. Box Number is Not Acceptable)  
 9403 SARAZEN PLACE  
 City PALMETTO FL Zip Code 34221

8. 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 \_\_\_\_\_ DATE **04/08/2001**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE D  Delete  
 NAME STEVENSON ELIZABETH A  
 STREET ADDRESS 4 SECOND AVE  
 CITY-ST-ZIP SINGAPORE 1026

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE D  Delete  
 NAME STEVENSON PHILIP  
 STREET ADDRESS 4 SECOND AVE  
 CITY-ST-ZIP SINGAPORE 1026

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE D  Delete  
 NAME LUCAS SUZANNE  
 STREET ADDRESS 105 4TH AVENUE NE 408  
 CITY-ST-ZIP ST PETERSBURG FL

TITLE D  Change  Addition  
 NAME LUCAS SUZANNE  
 STREET ADDRESS 9403 SARAZEN PLACE  
 CITY-ST-ZIP PALMETTO FL 34221

TITLE D  Delete  
 NAME LUCAS ALAN  
 STREET ADDRESS 105 4TH AVENUE NE 408  
 CITY-ST-ZIP ST PETERSBURG FL

TITLE D  Change  Addition  
 NAME LUCAS ALAN  
 STREET ADDRESS 9403 SARAZEN PLACE  
 CITY-ST-ZIP PALMETTO FL 34221

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN LUCAS D 04/08/2001  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)