2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000057604

DOCOMENT#1 54000057004

Entity Name: BLUE MOON ENTERPRISES, INC.

FILED Apr 28, 2003 Secretary of State

Littly Na	IIIIE. BLUE WOON ENTERFRISES, INC.		
Current Principal Place of Business:		New Principal Place of Business:	
815 N MA OCALA, F	GNOLIA AVE FL 34475 US		
Current Mailing Address:		New Mailing Address:	
	ODBEND CIRCLE RT RICHEY, FL 34655 US		
FEI Number	r: 59-3265391 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:	
2327 WO	S, SANDRA ODBEND CIRCLE RT RICHEY, FL 34655 US		
	e named entity submits this statement for th te of Florida.	e purpose of changing its registered office or registered agent, or both	th,
SIGNATU	IRE:		
	Electronic Signature of Registered A	Agent Date	_
	ampaign Financing Trust Fund Contribution ().	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS:
Title: Name: Address: City-St-Zip:	PT () Delete GLUCK, GERALD 1551 CROSSVINE COURT NEW PORT RICHEY, FL 34655	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	VP/S () Delete MASTER, SANDRA 2327 WOODBEND CIRCLE NEW PORT RICHEY, FL 34655	Title: VP/S (X) Change () Addition Name: MASTERS, SANDRA Address: 2327 WOODBEND CIRCLE City-St-Zip: NEW PORT RICHEY, FL 34655	

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: SANDRA MASTERS VP 04/28/2003