FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000060222 (4)**

1. Corporate Name

THE MOON AND ME, INC.

Principal Place of Business

61 S.E. 1ST AVE
BOCA RATON FL 33432

Mailing Address

61 S.E. 1ST AVE
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/11/1994**

3a. Date of Last Report:

2. Principal Place of Business — 21:

Suite, Apt. #, etc. — 22:

City & State — 23:

24: 25:

2a. Mailing Address — 26:

Suite, Apt. #, etc. — 27:

City & State — 28:

29: 30:

4. FEI Number: 65-0509096 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation was formed for the purpose of electing to be governed by Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LEFEORT, RONI
61 S.E. 1ST AVE
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section [illegible], Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The business was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of [illegible] Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT + Director Roni Lefeort 3069 NW 25th Terr. Boca Raton FL 33431
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President and Director Leona Lefeort 3570 S. Ocean Blvd Palm Beach FL 33480
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secy/Treas and Director Robert Lefeort 3069 NW 25th Terr Boca Raton FL 33431
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

14. To the best of my knowledge, the information supplied with the blanks is complete and accurate. I further certify that the corporation has complied with all applicable requirements of Florida Statutes pertaining to the reinstatement of a corporation that has been administratively dissolved. I am a director or officer 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 12 or Block 13 with an asterisk (*).

SIGNATURE: [signature] 5/3/95 $87.50

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL FILING OF FICER OR DIRECTOR — Date — Filing Fee

0284960 CP

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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED

57

TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000060899 (9)

1. Corporate Name

FORTUNE CONSULTING GROUP, INC.

Principal Place of Business	Mailing Address
2001 N.E. 59TH CT. FT. LAUDERDALE FL 33308	2001 N.E. 59TH CT. FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified: 08/18/1994
3a. Date of Last Report:

2. Principal Place of Business — 21 / 22 Suite, Apt. # etc. / 23 City & State / 24 Zip / 25 Country
2a. Mailing Address — 26 / 27 Suite, Apt. # etc. / 28 City & State / 29 Zip / 30 Country

4. FEI Number: 65-0512761 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JONES, ROBERT E 2001 N.E. 59TH CT. FT. LAUDERDALE FL 33308	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TITLE: PRESIDENT NAME: ROBERT E. JONES STREET ADDRESS: 2001 N.E. 57 COURT CITY-ST-ZIP: FT. LAUDERDALE, FL. 33308 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(i), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert E Jones Robeer E Jones — May 1, 1995 (305) 491-9652
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0214782 CP