

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000035654 (9)**

1. Corporation Name

MOORE ENERGY & SUN, INC.



Principal Place of Business

**1015 S.E. 9 AVE.
DEERFIELD BEACH FL 33441**

Mailing Address

**1015 S.E. 9 AVE.
DEERFIELD BEACH FL 33441**

3. Date Incorporated or Qualified
05/02/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0575387

Applied For
Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

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

22. City & State

27. City & State

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

23. Zip

Country

28. Zip

Country

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

**MOORE, JOYCE A
1015 S.E. 9 AVE.
DEERFIELD BEACH FL 33441**

81. Name

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

83. 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

Signature typed or printed name of the person signing this report

Typed or printed name of the person signing this report

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	Bertus H Moore III	
STREET ADDRESS	1015 SE 9 Ave	
CITY-ST-ZIP	Deerfield Beach FL, 33441	
TITLE	STRIS.	<input type="checkbox"/> DELETE
NAME	JOYCE A. MOORE	
STREET ADDRESS	1015 SE 9 AVE	
CITY-ST-ZIP	DEERFIELD BEACH FL. 33441	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1. TITLE	UP.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	MICHAEL F MORROW	
3. STREET ADDRESS	363 NW 107 AVE	
4. CITY-ST-ZIP	POMERAKE PINES, FL. 33026	
5. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-ST-ZIP		
9. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-ST-ZIP		
13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this 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 or person 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-96 305-360-9052

CR2E034 (12/95)