2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 12, 2007 08:00 A Secretary of State **DOCUMENT # P95000091912** HALF MOON CONSULTANTS, INC. Principal Place of Business Mailing Address 951 SE 12 STREET * 951 SE 12 STREET POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 No Chg-P CR2E034 (11/05) 04092007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0624771 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUDSON, HENRY A DO NOT WRITE **951 SE 12 STREET** POMPANO BEACH, FL 33060 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be U00000702243 04/20/07-80032-008 150.00 FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME HUDSON, HENRY A. 951 S.E. 12TH STREET STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL NAME HUDŚÓN, ŚUŚAN 951 S.E. 12TH STREET STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

SIGRATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

5 45AN HUNSON 4/10/07 9540

FILED