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Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000050999 (7)

1. Corporation Name
MOON TEAM, INC.

Principal Place of Business

325 W. 74TH PLACE
HIALEAH FL 33014

Mailing Address

325 W. 74TH PLACE
HIALEAH FL 33014-5024



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/14/1996		3a. Date of Last Report	
21. State, Apt. #, etc.		26. State, Apt. #, etc.		4. FEI Number 65-0675006		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip	Country	28. Zip	Country	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Zip	Country	29. 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 OSHINSKY, LEONARD 1150 E. HALLANDALE BEACH BLVD. SUITE A HALLANDALE FL 33009				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 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, and am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (PRINT: Registered Agent's signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	TIAPAGO, MARCO	1.2 NAME	
STREET ADDRESS	325 W. 74TH PLACE	1.3 STREET ADDRESS	
CITY-STATE-ZIP	HIALEAH FL 33014	1.4 CITY-STATE-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	GUERRA, LUIS	2.2 NAME	
STREET ADDRESS	325 W. 74TH PLACE	2.3 STREET ADDRESS	
CITY-STATE-ZIP	HIALEAH FL 33014	2.4 CITY-STATE-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	MOON, MARK	3.2 NAME	
STREET ADDRESS	325 W. 74TH PLACE	3.3 STREET ADDRESS	
CITY-STATE-ZIP	HIALEAH FL 33014	3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. 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 contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-97

Date

Day's in File #

0121701

CR2E034 (9/96)