

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000046872

FILED  
Mar 25, 2004  
Secretary of State

Entity Name: FULL MOON PROPERTIES, INC.

## Current Principal Place of Business:

2100 W 76TH ST  
403  
HIALEAH, FL 33016 US

## New Principal Place of Business:

## Current Mailing Address:

2100 W 76TH ST  
403  
HIALEAH, FL 33016 US

## New Mailing Address:

FEI Number: 65-0773521

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIGDALIA, ALVARADO  
18552 NW 19TH ST.  
PEMBROKE PINES, FL 33029

## Name and Address of New Registered Agent:

MIGDALIA, PRESTAN E  
18552 NW 19TH ST.  
PEMBROKE PINES, FL 33029

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.

SIGNATURE: MIGDALIA E. PRESTAN

03/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: ALVARADO, MIGDALIA E  
Address: 18552 NW 19TH ST  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TD ( ) Delete  
Name: PRESTON, ELSA  
Address: 18552 NW 19 ST.  
City-St-Zip: PEMBROKE PINES, FL 33029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: PRESTAN, MIGDALIA E  
Address: 18552 NW 19TH ST  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TD (X) Change ( ) Addition  
Name: PRESTAN, ELSA  
Address: 18552 NW 19 ST.  
City-St-Zip: PEMBROKE PINES, FL 33029

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: MIGDALIA E. PRESTAN

PSD

03/25/2004

Electronic Signature of Signing Officer or Director

Date