

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000021243

FILED
Mar 19, 2003
Secretary of State

Entity Name: MOON INTERNATIONAL, INC.

Current Principal Place of Business:

471 SOLL ST.
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

471 SOLL ST.
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3496149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CENTAFANTI, GARY D
471 SOLL ST.
NAPLES, FL 34109

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CENTAFANTI, GARY D
Address: 471 SOLL ST.
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: CENTAFANTI, CATHY
Address: 471 SOLL ST.
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: CHUK, MAGEN
Address: 471 SOLL ST.
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: HITCHCOCK, STERLING
Address: 1085 SHIPWATCH CIR.
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: HITCHCOCK, CARREY
Address: 1085 SHIPWATCH CIR.
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARY D. CENTAFANTI

PRES

03/19/2003

Electronic Signature of Signing Officer or Director

Date