

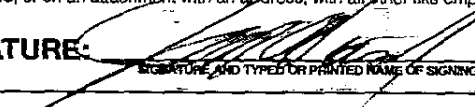


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 19, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000105324</b> 1. Entity Name <b>MOON, SUN &amp; STARS, INC.</b>			
Principal Place of Business <b>3001 PONCE DE LEON BLVD. SUITE 203 CORAL GABLES, FL 33134</b>		Mailing Address <b>3001 PONCE DE LEON BLVD. SUITE 203 CORAL GABLES, FL 33134</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
			
		07142005 No Chg-P CR2E034 (10/03)	
4. FEI Number <b>58-2438253</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>WARD, JACKIE M 3001 PONCE DE LEON BLVD. SUITE 203 CORAL GABLES, FL 33134</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, JACKIE M 3001 PONE DE LEON BLVD., STE. 203 CORAL GABLES, FL 33134		
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<b>DO NOT WRITE IN THIS SPACE</b>			
12. 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 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.			
<b>SIGNATURE:</b> 		Jackie M. Ward 14 July 2005 404.847.9133 Ext 222	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	