## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V62345

(6)

Mailing Address

BLUE MOON CHARTER CO.

Secr	etary	of	Stat

**FILED** 

Feb 10 1997 8:00am

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								3. Date Incorporated or Qualified 09/04/1992		ite of Last F <b>15/1996</b>	łeport
2. Principal Place of Business		}	Mailing Address				4. FEI Number	_ <del>\</del>	-	pplied For	
21			26		65-0355749			ot Applicabl			
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional lequired			
City & State	9			Crty & State		6. Election Campaign Financing	ection Campaign Financing \$5.00 N		May Be		
23		28			Trust Fund Contribution Added to Fee			to Fees			
Zip →	<b>├</b> ─¬	Country	F	Zip	Country			8. This corporation has liability for intangible tax under s. 199.03			
4	25 A Name and	Address of Curre	29	ared Agent	30			Florida Statutes  10. Name and Address of New	Yes [		
GED	NHEUSER, RO		III NEBISI	area Agent		81	Name	to, Name and Address of New I	negistered .	нувін	
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office or re	o the provisions egistered agent	or both in the Stati	uz and 60 e of Florida	z. Ibue, Fiorida Stalu a. Such change was	nes, the at authorized	ove by	the corporal	poration submits this statement for the lion's board of directors. I hereby acc	ept the app	cnanging i ointment as	its registered s registered
agent. I an	m familial with,	d accupy the oblig	pations of,	Section 607.0356, F	lorida Stat	utes		1/11-11-5-5	./2.	107	Ü
SIGNATURE .		pullens		KOC	seet			NHEUSER	1/20	17(	
12.	Signature, typnid or	inted name of registered as OFFICERS AN			11 Tagistere:	Age	nt signatine requi	red when reinstating) ADDITIONS/CHANGES TO OFF	DAIL	DIRECTO	DC IN 12
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4. I do 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 annual report or supplemental actual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver of 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 charged, or on an attaction with an address.

SIGNATURE.

11-28-99 56/-71/17