

**2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P14000085455

**Entity Name:** MOON PHARMACY INC.

**Current Principal Place of Business:**

8325 W 24 AVE BAY 11  
HIALEAH, FL 33016

**Current Mailing Address:**

8325 W 24 AVE BAY 11  
HIALEAH, FL 33016 US

**FEI Number:** 47-2111497

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LOPEZ ALONSO, ROSELYN  
8325 W 24 AVE BAY 11  
HIALEAH, FL 33016 US

*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:** ROSELYN LOPEZ ALONSO

03/01/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LOPEZ ALONSO, ROSELIN  
Address 8323 W 24 AVE BAY 11  
City-State-Zip: HIALEAH FL 33016

*I hereby 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 all other like empowered.*

**SIGNATURE:** LOPEZ ALONSO , ROSELIN

PRESIDENT

03/01/2017

Electronic Signature of Signing Officer/Director Detail

Date