

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 14, 2003 8:00 am**  
**Secretary of State**

02-14-2003 90214 009 \*\*\*150.00

DOCUMENT # P98000002845

1. Entity Name  
RAVEN MOON ENTERTAINMENT, INC.



Principal Place of Business  
120 INTERNATIONAL PARKWAY, STE. 220  
HEATHROW FL 32746

Mailing Address  
120 INTERNATIONAL PARKWAY, STE. 220  
HEATHROW FL 32746

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3485779

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DI-FRANCESCO, JOEY  
120 INTERNATIONAL PARKWAY, STE. 220  
HEATHROW FL 32746

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME DI FRANCEICO, JOEY  
STREET ADDRESS 120 INTERNATIONAL PARKWAY, STE. 220  
CITY-ST-ZIP HEATHROW FL 32746

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME DI FRANCEICO, BERNADETTE  
STREET ADDRESS 120 INTERNATIONAL PARKWAY, STE. 220  
CITY-ST-ZIP HEATHROW FL 32746

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME CHRYSTIE, STEPHEN  
STREET ADDRESS 120 INTERNATIONAL PKWY SUITE 220  
CITY-ST-ZIP LAKE MARY FL 32746

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME HOTOPP, THOMAS  
STREET ADDRESS 120 INTERNATIONAL PKWY STE 220  
CITY-ST-ZIP HEATHROW FL 32746

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME WEINSTOCK, NORMAN P  
STREET ADDRESS 120 INTERNATIONAL PKWY STE 220  
CITY-ST-ZIP HEATHROW FL 32746

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME ARCARI, ANTHONY  
STREET ADDRESS 120 INTERNATIONAL PKWY STE 220  
CITY-ST-ZIP HEATHROW FL 32746

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE REQUIRED

2/12/03 (407) 304-4764

Date

Daytime Phone #

CR2E034 (10/02)