

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000002345

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

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number

59-3485779

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	DI FRANCEICO, JOEY	
STREET ADDRESS	120 INTERNATIONAL PARKWAY, STE. 220	
CITY - ST - ZIP	HEATHROW FL 32746	
TITLE	D	<input type="checkbox"/> Delete
NAME	DI FRANCEICO, BERNADETTE	
STREET ADDRESS	120 INTERNATIONAL PARKWAY, STE. 220	
CITY - ST - ZIP	HEATHROW FL 32746	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHRYSTIE, STEPHEN	
STREET ADDRESS	120 INTERNATIONAL PKWY SUITE 220	
CITY - ST - ZIP	LAKE MARY FL 32746	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEINSTOCK, NORMAN P	
STREET ADDRESS	120 INTERNATIONAL PKWY STE 220	
CITY - ST - ZIP	HEATHROW FL 32746	
TITLE	D	<input type="checkbox"/> Delete
NAME	ARCARI, ANTHONY	
STREET ADDRESS	120 INTERNATIONAL PKWY STE 220	
CITY - ST - ZIP	HEATHROW FL 32746	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/04 (407) 798-7839