No. C 181826	Due no later than Feb 28, 2010		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form 1. Mailing Address: Correct in this box if needed. MOONPAX, INC. KRISTIN WOLFENDEN 1810 W STATE ST #326 BOISE ID 83702 USA		1810 W ST, BOISE ID 3. <u>New</u> Registe	KRISTIN WOLFENDEN 1810 W STATE ST #326 BOISE ID 83702 3. New Registered Agent Signature:*			
4. Corporations: Enter Names and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasu	rer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER KRISTIN WO	OLFENDEN	10271 W SHILOH DRIVE	BOISE	ID	USA	83704	
DIRECTOR KRISTIN WO	OLFENDEN	10271 W SHILOH DRIVE	BOISE	ID	USA	83704	
SECRETARY KRISTIN WO	OLFENDEN	10271 W SHILOH DRIVE	BOISE	ID	USA	83704	
PRESIDENT KRISTIN WO	DLFENDEN	10271 W SHILOH DRIVE	BOISE	ID	USA	83704	
5. Organized Under the Laws of: 6. Annual Report		must be signed.*					
ID Signature: Kr		stin Wolfenden Date: 03/17/2010					
C 181826	Name (type or		Title: President				
Processed 03/17/2010	* Electronically provided signatures are accepted as original signatures.						