
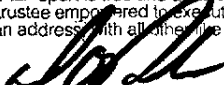


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 03, 2005 08:00 AM
Secretary of State

DOCUMENT # 854535.			
1. Entity Name MONARCH INDUSTRIES, INC.			
Principal Place of Business 51 BURMAC RD. WINNIPEG, MANITOBA, CA R3G- XX		Mailing Address P.O. BOX 429 WINNIPEG MANITOBA CANADA R3C 3E4, XX	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		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 _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREUBER, DONALD W	NAME	
STREET ADDRESS	1051 SHERWIN ROAD	STREET ADDRESS	
CITY-ST-ZIP	WINNIPEG, MB, CA	CITY-ST-ZIP	U00000368916 06/03/05-80003-001 550.00
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNN, GENE D	NAME	
STREET ADDRESS	51 BURMAC RD	STREET ADDRESS	
CITY-ST-ZIP	WINNIPEG, MB, CA	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'ROURKE, DAN	NAME	
STREET ADDRESS	51 BURMAC RD.	STREET ADDRESS	
CITY-ST-ZIP	WINNIPEG, MB, CA	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BHAYANA, VIC	NAME	
STREET ADDRESS	51 BURMAC RD.	STREET ADDRESS	
CITY-ST-ZIP	WINNIPEG, MB, CA	CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, ROY	NAME	
STREET ADDRESS	51 BURMAC RD.	STREET ADDRESS	
CITY-ST-ZIP	WINNIPEG, MB, CA	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FALK, PETER J	NAME	
STREET ADDRESS	51 BURMAC RD	STREET ADDRESS	
CITY-ST-ZIP	WINNIPEG, MB, CA	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)(f), 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 info empowered			
SIGNATURE:  D. O'ROURKE		25/5/05 (200) 786-7921	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	