

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED) - MINIMUM AMOUNT DUE TO REINSTATE: \$750.

FILED

Jul 22 1998 8:00am
 Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Moxham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # G75168 (6)
 1. Corporation Name
 THE MONSTER CORPORATION



Principal Place of Business: 6041 KIMBERLY BLVD. SUITE I N. LAUDERDALE FL 33068-2816 US
 Mailing Address: 6041 KIMBERLY BLVD. SUITE I N. LAUDERDALE FL 33068-2816 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25
 2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

3. Date Incorporated or Qualified: 12/12/1983
 4. FEI Number: 59-2771375 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
 6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes [X] No

9. Name and Address of Current Registered Agent
 MONTAG, MICHAEL
 4131 NW 58 ST
 COCONUT CREEK FL 33073-5909

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS
 TITLE: P
 NAME: MONTAG, BARBARA
 STREET ADDRESS: 3955 NO B HILL RD. APT. 100
 CITY-ST-ZIP: SUNRISE FL 33351
 TITLE: ST
 NAME: MONTAG, MICHAEL A
 STREET ADDRESS: 4131 NW 58 ST. L
 CITY-ST-ZIP: COCONUT CREEK FL 33073-5909

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP
 2.1 TITLE
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP
 3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP
 4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP
 5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP
 6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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 -07/30/98--01008--021
 ***150.00

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Barbara Montag* 7/1/98 054 979-1193

CR2E034 (5/98)

6-29-98



PfJ

The Monster Corporation

To Whom It may concern:

We received a second notice for filing a 1998 Corporation Annual Report today in the mail. We have been incorporated since 12/12/83 and have never been delinquent with any payments required by us.

We never received the First Notice. We moved 1 year ago and perhaps that is why the Notice was not received. We are a small business and \$550.00 would be a hardship for us.

Enclosed is a check for the original application fee of \$150.00. We hope that this will be accepted.

Thank You
Michael Montag