

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000029255

**Entity Name:** MONTE NEGRO GROUP, INC.**Current Principal Place of Business:**12878 KEY LIME BLVD.  
WEST PALM BEACH, FL 33412**Current Mailing Address:**12878 KEY LIME BLVD.  
WEST PALM BEACH, FL 33412 US**FEI Number:** 38-4156924**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR.  
STE. A  
TALLAHASSEE, FL 32301 US*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.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P
Name	LARRAINZA, CESAR E
Address	12878 KEY LIME BLVD.
City-State-Zip:	WEST PALM BEACH FL 33412

Title	S
Name	LARRAINZA, XOCHILT
Address	12878 KEY LIME BLVD.
City-State-Zip:	WEST PALM BEACH FL 33412

Title	D
Name	LARRAINZA, CARLOS
Address	12878 KEY LIME BLVD.
City-State-Zip:	WEST PALM BEACH FL 33412

Title	D
Name	VILLASUSO, JOSE
Address	12878 KEY LIME BLVD.
City-State-Zip:	WEST PALM BEACH FL 33412

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LARRAINZA, CESAR E**MANAGER****05/01/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date