


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 182173 1. Entity Name MONTE CARLO INC	
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Principal Place of Business 212 W ESPANOLA WAY MELBOURNE, FL 32901	Mailing Address 212 W ESPANOLA WAY MELBOURNE, FL 32901
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DO NOT WRITE IN THIS SPACE



02122008 No Chg-P CRZE034 (11/05)

4. FEI Number 58-6066478	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MILLS, LUTHER P
428 PORT ROYAL BLVD
SATELLITE BEACH, FL 32937**

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLS, LUTHER 428 PORT ROYAL BLVD SATELLITE BEACH, FL 32937
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MARTIN, SHARON K. 212 W. ESPANOLA WAY MELBOURNE, FL 32901.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLS, TIMOTHY A. 2328 BLUE SAPPHIRE CIR. ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLS, DANIEL C. 613 SEMINOLE AVE LONGWOOD, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOREY, NANCYK. 4308 DUNCOMBE DRIVE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/14/06-80028-007 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Sharon K. Martin **3/29/2006 321-725-4060**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #