

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90030 010 ***150.00

DOCUMENT # 852801

1. Entity Name

MONTICELLI INVESTMENTS, INC.

Principal Place of Business

Mailing Address

**% HELGA J. MARKOVICS
 1518 STATE AVENUE "A"
 HOLLY HILL FL 32117
 US**

**% HELGA J. MARKOVICS
 1518 STATE AVENUE "A"
 HOLLY HILL FL 32117-2241
 US**

09027841



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2750149**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARKOVICS, HELGA J.
 1518 STATE AVENUE
 UNIT A
 HOLLY HILL FL 32117**

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.

SIGNATURE *Helga J. Markovics* / **HELGA J. MARKOVICS - S-ADMINISTRATOR 2/19/00**

Tax filing requirement and elects to do so.
 (See criteria on back)

**FILE NOW!!! FEE IS \$750.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> Delete
NAME	FRANCESCHI, MAURO	
STREET ADDRESS	AVE. 15 ESQ. CALLE 70	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
TITLE	TD	<input type="checkbox"/> Delete
NAME	LARICE, ROBERTO	
STREET ADDRESS	AVE. 15 ESQ. CALLE 70	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
TITLE	VD	<input type="checkbox"/> Delete
NAME	FRANCESCHI, JUAN GUIDO	
STREET ADDRESS	AVE. 15 ESQ. CALLE 70	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MALVENTANO, FRANCISCO	
STREET ADDRESS	AVE. 15 ESQ. CALLE 70	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
TITLE	VD	<input type="checkbox"/> Delete
NAME	FRANCESCHI, SANTE	
STREET ADDRESS	AVE. 15 ESQ. CALLE 70	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
TITLE	S	<input type="checkbox"/> Delete
NAME	MARKOVICS, HELGA J.(ASST	
STREET ADDRESS	19 RIDGE TRAIL	
CITY-ST-ZIP	ORMOND BEACH FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Mauro Franceschi / **MAURO FRANCESCHI, PD**

2/19/00 (904) 677-3741

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/99)