2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048025

Entity Name: MONICA PLUS, LLC.

FILED Jul 03, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4112 SOUTH ORANGE BLOSSOM TRAIL KISSIMMEE, FL 34746 US

Current Mailing Address: New Mailing Address:

2724 EAGLE CANYON DR SOUTH KISSIMMEE, FL 34746

Name:

FEI Number: 41-2237983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AMERICAN SAFETY COUNCIL, INC. OLIVERA, MONICA MGR 5125 ADANSON ST 2724 EAGLE CANYON DR. S. KISSIMMEE, FL 34746 SUITE 500 ORLANDO, FL 32804 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.

07/03/2008 SIGNATURE: MONICA OLIVERA

> Electronic Signature of Registered Agent Date

> > Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

OLIVERA, MANUEL Address: 4107 SOUTH ORANGE BLOSSOM TRAIL Address: City-St-Zip: KISSIMMEE, FL 34746 US City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

Name: OLIVERA, MONICA Name: Address: 2724 SOUTH EAGLE CANYON DR Address: City-St-Zip: KISSIMMEE, FL 34746 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MONICA OLIVERA 07/03/2008