

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -9 AM 8:50

DOCUMENT # **M42690** (1)

1. Corporation Name
MONS CORP.

Principal Place of Business

2441 NW 93 AVE
SUITE 109
MIAMI FL 33172

Mailing Address

2441 NW 93 AVE
SUITE 109
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **12/04/1986** 3a. Date of Last Report **02/01/1994**

2. Principal Place of Business **2601 SOUTH COURSE DR.** 2a. Mailing Address **2601 SOUTH COURSE DR.**

Suite, Apt. #, etc. **402** Suite, Apt. #, etc. **402**

City & State **POMPANO BEACH FL** City & State **POMPANO BEACH FL**

Zip **33069** Country **FLORIDA** Zip **33069** Country **FLORIDA**

4. FEI Number **59-2741260** 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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
ALVAREZ, MAX
520 BRICKELL KEY DR
SUITE 903
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name **HUGO VELEZ**
82 Street Address (P.O. Box Number is Not Acceptable) **2601 SOUTH COURSE DR. APT/402**
83
84 City **POMPANO BEACH** FL 85 Zip Code **33069**

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 *Hugo Velez* **HUGO VELEZ** DATE **3/3/95**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	ALVAREZ, MAX	520 BRICKELL KEY DR, #903	MIAMI FL 33131
S	ALVAREZ, SARA	520 BRICKELL KEY DR, #903	MIAMI FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
	VELEZ, HUGO	2601 SOUTH COURSE DR. APT/402	POMPANO BEACH, FL 33069	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(d), 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 recipient of trust or empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Hugo Velez* **HUGO VELEZ** DATE **3/3/95** (305) 687-5100