



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2007 08:00 AM
Secretary of State

DOCUMENT # M53215 1. Entity Name MONZON DEVELOPERS, INC.	
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Principal Place of Business 13300 S.W. 1ST STREET MIAMI, FL 33184	Mailing Address 13300 S.W. 1ST STREET MIAMI, FL 33184
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DO NOT WRITE IN THIS SPACE

	
01082007	No Chg-P CR2E034 (11/05)
4. FEI Number 59-2820887	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required

6. Name and Address of Current Registered Agent MONZON, ESTHER 13300 S.W. 1ST STREET MIAMI, FL 33184
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DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when restate)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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	TS MONZON, ESTHER 13300 S.W. 1ST STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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<p>000000637702 02/26/07-80072-006 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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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: <u>Esther Monzon</u> ESTHER MONZON <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>2/13/07</u> <small>Date</small>	<u>305-226-5132</u> <small>Daytime Phone #</small>
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