

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90190 032 ***150.00

DOCUMENT # M88792

1. Entity Name
ALLIANCE MONUMENT COMPANY



Principal Place of Business
**5825 PLUNKETT ST.
HOLLYWOOD, FL 33023 US**

Mailing Address
**5825 PLUNKETT ST.
HOLLYWOOD, FL 33023 US**

DO NOT WRITE IN THIS SPACE



01152008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0116389

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BARANY, SANDOR JR
5825 PLUNKETT ST
HOLLYWOOD, FL 33023**

**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

Sandor Barany

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Z-28-08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BARANY, SANDOR JR
STREET ADDRESS	18200 SW 68TH COURT
CITY-ST-ZIP	SOUTHWEST, FL 33331
TITLE	D
NAME	BARANY, TIM
STREET ADDRESS	5825 Plunkett St.
CITY-ST-ZIP	Hollywood FL 33023
TITLE	S
NAME	BARANY, JANICE
STREET ADDRESS	18200 SW 68TH COURT
CITY-ST-ZIP	SOUTHWEST, FL 33331
TITLE	VP
NAME	BARANY, TOM
STREET ADDRESS	5740 S W 54 CT
CITY-ST-ZIP	DAVIE, FL 33314
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

Delete

**DO NOT WRITE
IN THIS SPACE**

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:

Sandor Barany

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Z-28-08

Date

954-966-9415

Daytime Phone #