2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006
Secretary of State

DOCUMENT# P00000083881

Entity Name: MONACO INTERIORS GROUP, INC.

Current Principal Place of Business:

ONE SOUTH OCEAN BLVD.
STE. 1
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

ONE SOUTH OCEAN BLVD.
STE. 1
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-1040135 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, THOMAS M
2400 E COMMERCIAL BLVD #820
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: WOOLLEY, TIFFANY
Address: 16260 BRIDLEWOOD CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Delete
Name: POSTMA, JEAN M
Address: 1401 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: DVP ( ) Delete
Name: GORDON, BARBARA
Address: ONE SOUTH OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: POSTMA, JEAN M
Address: 1877 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: DVP (X) Change ( ) Addition
Name: GORDON, BARBARA
Address: ONE SOUTH OCEAN BLVD. STE 1
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIFFANY WOOLLEY DPS 04/06/2006

Electronic Signature of Signing Officer or Director — Date