

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000021608

Entity Name: MONACO TRADING, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

2701 WEST MCNAB RD.
POMPANO BEACH, FL 33064

New Principal Place of Business:

2701 WEST MCNAB RD.
POMPANO BEACH, FL 33069

Current Mailing Address:

2701 WEST MCNAB RD.
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 65-1086794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENBE, ADRINE HERIAN
2701 WEST MCNAB RD.
POMPANO BEACH, FL 33069 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: D () Delete
Name: HERIAN, MURAT
Address: 17329 BOCA CLUB BLVD.#6
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: HERIAN, NUBAR
Address: 17329 BOCA CLUB BLVD.#6
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: PENBE, ADRINE H
Address: 2701 W. MCNAB ROAD
City-St-Zip: POMPANO BEACH, FL 33069

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: PENBE, CLIFF
Address: 2701 W. MCNAB ROAD
City-St-Zip: POMPANO BEACH, FL 33069

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 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: ADRINE HERIAN PENBE

D

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date