2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P01000070891

Entity Name: MONT MONT, INC.

Current Principal Place of Business:

2471 JENSCOT ROAD
ST CLOUD, FL 34771

New Principal Place of Business:

PO BOX 560369
ORLANDO, FL 32856 US

Current Mailing Address:

2471 JENSCOT ROAD
ST CLOUD, FL 34771

New Mailing Address:

PO BOX 560369
ORLANDO, FL 32856 US

FEI Number: 59-3730537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOUST, KATHLEEN M
17 S. ORLANDO AVE
KISSIMMEE, FL 34741 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: DP ( ) Delete
Name: ARCHER, TRACY
Address: 2471 JENSCOT ROAD
City-St-Zip: ST CLOUD, FL 34771

Title: D ( ) Delete
Name: ARCHER, TAYLOR M SR
Address: 2471 JENSCOT ROAD
City-St-Zip: ST CLOUD, FL 34771

Title: D ( ) Delete
Name: ARCHER, ANNETTE W
Address: 2471 JENSCOT ROAD
City-St-Zip: ST CLOUD, FL 34771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ARCHER, TRACY
Address: PO BOX 560369
City-St-Zip: ORLANDO, FL 32856 US

Title: D (X) Change ( ) Addition
Name: ARCHER, TAYLOR M SR
Address: PO BOX 560369
City-St-Zip: ORLANDO, FL 32856 US

Title: D (X) Change ( ) Addition
Name: ARCHER, ANNETTE W
Address: PO BOX 560369
City-St-Zip: ORLANDO, FL 32856 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TRACY ARCHER DP 04/29/2005

Electronic Signature of Signing Officer or Director — Date