

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065551

FILED  
Apr 15, 2005  
Secretary of State

Entity Name: MONGE & MADRIGAL CORP.

**Current Principal Place of Business:**

7345 SAND LAKE RD.  
203  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

7345 SAND LAKE RD.  
203  
ORLANDO, FL 32819

**New Mailing Address:**

FEI Number: 20-1213965      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONGE, JOSE H  
10738 MYSTIC CIR.  
304  
ORLANDO, FL 32836 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: PD ( ) Delete  
Name: MONGE, JOSE H  
Address: 10738 MYSTIC CIR. #304  
City-St-Zip: ORLANDO, FL 32836

Title: VTD ( ) Delete  
Name: MADRIGAL, MARIETA  
Address: 10738 MYSTIC CIR. #304  
City-St-Zip: ORLANDO, FL 32836

Title: SD ( ) Delete  
Name: MONGE, JOSE H  
Address: 10738 MYSTIC CIR. #304  
City-St-Zip: ORLANDO, FL 32836

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: MONGE, JOSE H  
Address: 2624 PISCES DR.  
City-St-Zip: ORLANDO, FL 32837

Title: DVT (X) Change ( ) Addition  
Name: MADRIGAL, MARIETA  
Address: 2624 PISCES DR.  
City-St-Zip: ORLANDO, FL 32837

Title: DS (X) Change ( ) Addition  
Name: MONGE MADRIGAL, JOSE H  
Address: 2624 PISCES DR.  
City-St-Zip: ORLANDO, FL 32837

Title: D2VP ( ) Change (X) Addition  
Name: MONGE, ALEJANDRA M  
Address: 2624 PISCES DR.  
City-St-Zip: ORLANDO, FL 32837

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: JOSE H. MONGE

DP

04/15/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date