

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154865

Entity Name: MONA CENTER, INC.

FILED
May 03, 2005
Secretary of State

Current Principal Place of Business:

1515 E FLETCHER AVE STE F
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

1515 E FLETCHER AVE STE F
TAMPA, FL 33612

New Mailing Address:

FEI Number: 86-1094336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST JEAN, CLAUDE
14919 REDCLIFF DR
TAMPA, FL 33625 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ST JEAN, CLAUDE
Address: 14919 REDCLIFF DR
City-St-Zip: TAMPA, FL 33625

Title: V () Delete
Name: ST JEAN, MARIE M
Address: 14919 REDCLIFF DR
City-St-Zip: TAMPA, FL 33625

Title: ST () Delete
Name: FEDERLIN, HUBERT J
Address: 1960 WILSON BLVD
City-St-Zip: NAPLES, FL 34120

Title: T () Delete
Name: BELLEVUE, DESIUS
Address: 860 NORTHEAST 178 TERRACE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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

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: CLAUDE ST. JEAN

P

05/03/2005

Electronic Signature of Signing Officer or Director

Date