

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000031288

FILED
Apr 30, 2007
Secretary of State

Entity Name: SCARSDALE - MONTE CARLO, INC.

Current Principal Place of Business:

5524 ETAN COURT
BOCA RATON, FL 33486

New Principal Place of Business:

5524 ETON COURT
BOCA RATON, FL 33486

Current Mailing Address:

18851 N.E. 29TH AVENUE
SUITE 900
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-2388925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUSSO, MARK E ESQ.
18851 NE 29 AVE STE 900
AVENTURA, FL 33180 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: HIRSCHFELD, DAVID
Address: 5524 ETAN COURT
City-St-Zip: BOCA RATON, FL 33486

Title: DVT () Delete
Name: GOODMAN, MITCH
Address: 5524 ETAN COURT
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVT (X) Change () Addition
Name: GOODMAN, MITCH
Address: 5524 ETON COURT
City-St-Zip: BOCA RATON, FL 33486

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: DAVID HIRSCHFELD

DPS

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date