## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000137756

City-St-Zip: CAPE CORAL, FL 33914

Entity Name: MONACO ESTATE HOMES, INC.

FILED Mar 23, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:		
	ORADO PKY. RAL, FL 3391				
Current Mailing Address:			New Mailing Address	:	
	ORADO PKY. RAL, FL 3391				
FEI Number	: 20-1701378	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1105 CAPI STE C	DARRIN R ES E CORAL PKV RAL, FL 3390	WY EAST			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CLASSETTI, A 2118 EL DORA	ADO PKY.W.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( CLASSETTI, N 2837 S.W. 26 CAPE CORAL	AVE.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	SECT ( CLASSETTI, P		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ARMONDO CLASSETTI PRES 03/23/2009