

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155248

Entity Name: MONDAI ALL CONTRACTORS, INC

FILED
Mar 07, 2005
Secretary of State

Current Principal Place of Business:

4745 CASON COVE DR
APT # 2106
ORLANDO, FL 32811 US

New Principal Place of Business:

Current Mailing Address:

4745 CASON COVE DR
APT # 2106
ORLANDO, FL 32811 US

New Mailing Address:

FEI Number: 20-1881794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, CAROLINE
5950 LAKEHURST DR
SUITE 246
ORLANDO, FL 32819 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: P () Delete
Name: FERREIRA, FERNANDO O
Address: 4745 CASON COVE DR APT 2106
City-St-Zip: ORLANDO, FL 32811 US

Title: VP () Delete
Name: PEREIRA, LUCIANO
Address: 4745 CASON COVE DR APT 2106
City-St-Zip: ORLANDO, FL 32811 US

Title: T () Delete
Name: COELHO, LEONARDO
Address: 4929 LUNA NEGRA DR
City-St-Zip: ORLANDO, FL 32811 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COELHO, LEONARDO
Address: 4745 CASON COVE DR APT 2106
City-St-Zip: ORLANDO, FL 32811

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

Title: T (X) Change () Addition
Name: RIBEIRO, JONATHA JR
Address: 6080 RALEIGH ST APT 2005
City-St-Zip: ORLANDO, FL 32835

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: LEONARDO COELHO

P

03/07/2005

Electronic Signature of Signing Officer or Director

_____ Date