

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000145103

FILED
Feb 13, 2006
Secretary of State

Entity Name: MONA LIZA ENTERPRISES, INC.

Current Principal Place of Business:

5840 RED BUG LAKE ROAD
#25
WINTER SPRINGS, FL 32780

New Principal Place of Business:

5840 RED BUG LAKE ROAD
#25
WINTER SPRINGS, FL 32708

Current Mailing Address:

5840 RED BUG LAKE ROAD
#25
WINTER SPRINGS, FL 32780

New Mailing Address:

5840 RED BUG LAKE ROAD
#25
WINTER SPRINGS, FL 32708

FEI Number: 20-4292422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUGLIELMO, MONA L
1920 BROOKS LANE
OVIEDO, FL 32765 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: GUGLIELMO, MONA L
Address: 5840 RED BUG LAKE ROAD, #25
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MONA GUGLIELMO

P

02/13/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date