2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000029670

Entity Name: MONLAGE & CO, INC

FILED Feb 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1602 ALTON ROAD 8501 SW 124 AVE 105 596 MIAMI BEACH, FL 33139 US MIAMI, FL 33183 US **Current Mailing Address: New Mailing Address:** 1602 ALTON ROAD MIAMI BEACH, FL 33139 US FEI Number: 26-1859102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROMERO, LUDMILLA 1602 ALTÓN ROAD 596 MIAMI BEACH, FL 33139 US 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:

Election Campaign Financing Trust Fund Contribution ().

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: PRFS () Delete Title: (X) Change () Addition ROMERO, LUDMILLA Name: ROMERO, LUDMILLA Name: 1602 ALTON ROAD, SUITE 596 1602 ALTON ROAD, SUITE 596 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: VΡ Title: (X) Change () Addition () Delete SEC Name: ALFONSO, ANTONIO Name: ALFONSO, ANTONIO

1602 ALTON ROAD, SUITE 596 1602 ALTON ROAD, SUITE 596 Address: Address:

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 US City-St-Zip: City-St-Zip:

Title: Title: () Delete PRF () Change (X) Addition

Name: MARIA, MARTINEZ M Name: 1602 ALTON ROAD, SUITE 596 Address: Address: City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139

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: LUDMILLA ROMERO **TRE** 02/25/2009