FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000027283 (9)

THE MONROE GROUP INCORPORATED

FILED Apr 22 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						A LABORATION NO SERVED WITH SOUTH COLLEGE	Bret Abela Ită	1, ,44,4 ,194, 18,	
7600 SOUTHL		2241 LAKE CRESCENT CT.							
SUITE 100-449 ORLANDO FL 32809		WINDERMERE FL 34786			DO NOT WRITE IN THIS SPACE				
US						3. Date Incorporated or Qualified			
						04/12/1993			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21 324	1 LIC Trescent Ct	26				59- <u>3183663</u>			ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22 City & Cont		City & State							equired
City State	<i>a</i> 1. '	City & State				Election Campaign Financing Trust Fund Contribution	П		May Be to Fees
23 V	Country Country	Zip	Cou	intry		8. This corporation owes or has p			
24 3419	86 25 Orange	29	30			Personal Property Tax due Jun			No
	9. Name and Address of Cwrrent					10. Name and Address of New R		Agent	
FL	MONROE			B1 Nam	ne			_	
760	0 \$0 UTHLAND BLVD			82 Stre	et Addre	ss (P.Q. Box Number is Not Accepta	ble)		
	TE 100-449			<u>_</u>	JA4	1 2/2 Prescost	1:2		
ORL	LANDO FL 32809			83	5.	0			
				84 City	\sim \sim	will have		65 - Zip	Code
							<u> Fl</u>	_ -2'	~\`\\\ L
11. Pursuant	to the provisions of Soctions 607.0502 egistered agent, or bold on the State of the familiar with, and acceptative obligation	and 607.1508, Florida Sta tu L'Elorida, Such change wa s	utes, the at	bove-name	ed corpo	ration submits this statement for the	purpose o	of changing it	ts registered
agent.	a familiar with, and accopy the obligation	ans of, Section 607.0505, F	lorida Stal	utes.	- p				
SIGNATURE	Signature, types or printed name of registered agent								
12.	Signature, types or printed name of registered agent. OFFICERS AND		11: Registered	d Agent signa	iure required	when re-installing) ADDITIONS/CHANGES TO OFF	DATE ICEDS AN	ID DIRECTOR	29 INI 12
TITLE	DPST	DELETE	1.1 1	TLE		ABBITTOTOTOTOTOTO	02.10744	Change	Addition
NAME	MONROE, F L		1.2 N/	AME					
STREET ADORESS	7600 SOUTHLAND BLVD, SUITE	100-449	1.3 \$1	REET ADDRES	s 0 ^	L	42		
CITY-ST-ZIP	ORLANDO FL		1.4 CI	TY-ST-Z(P	1/2	in lermens El	1, 5	4786	
TITLE		DELETE	2.1 TI	TLE				Change	Addition
NAME			2.2 N	AME	1				
STREET ADDRESS			2.3 \$1	REET ADDRES	SS				
CITY-ST-ZIP			2.4 C	ITY-ST-ZIP					
TITLE		☐ DELETE						L Change	☐ Addilion
NAME			3.2 N/	AME					
STREET ADDRESS			3.3 ST	REET ADDRES	SS				
CITY-ST-ZIP		DELETE		ITY-ST-ZIP				Change	Addition
TITLE NAME			4.1 T/ 4. 2 N					← AllaliAg	L. Addition
STREET ADDRESS				ianic Treet addres	28				
CITY-ST-ZIP				TY-ST- <i>Z</i> IP	~				
TITLE		DELETE	5.1 TI					Change	Addition
NAME			5.2 NA					_	
STREET ADDRESS				reet addres	ss				
CITY-ST-ZIP	_			TY-ST-ZIP					
TITLE		DELETE	6.1 TJ	TLE				Change	☐ Addition
NAME			6.2 N/	AME					
STREET ADDRESS			63 ST	REET ADDRES	ss				
CITY+ST-ZIP				TY-ST-ZIP					
14. I hereby o	certify that the information supplied with on this annual report or supplemental :	n this filing does not qualify annual report is true and ac	for the execurate and	emption st	lated in S signature	lection 119.0 7(3) (i), Florida Statutes. Is shall have th e same legal effect as	I further of if made u	ertify that the inder oath; th	information at I am an
officer or	on this annual report or supplemental a director of the corporation or the receiver Block 13 in changed, or on an all well	ver or trustee empowered to	execute t	his report	as requi	red by Chapter 607, Florida Statutes	and that	my name ap	pears in
DIOCK 12 C	or some roof dranged, or on an applica	non min an address.			11		(77	(い)	