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

PROFIT **CORPORATION ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000014843 (4)

MONICA INTERNATIONAL, INC.

FILED Mar 19 1998 8:00am Secretary of State



4940 BLANDING BLVD. JACKSONVILLE FL 32210		POST OFFICE BOX 7759 JACKSONVILLE FL 3223		DO NOT WRITE IN THIS	SPACE	
				3. Date Incorporated or Qualified 02/24/1994		
	Place of Business	2a. Mailing Address		4. FEI Number	I Ar	pplied For
21		26		59-3261168	No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	te	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees
Zip 24	Country 25	Zıp 29	Country 30	 This corporation owes or has paid the or Personal Property Tax due June 30. 	-	tangible No
	9. Name and Address of	Current Registered Agent		10. Name and Address of New Registered	Agent	
	ellot, sandra j		81 Name	• •		
4940 BLANDING BLVD. JACKSONVILLE FL 32210				idress (P.O. Box Number is Not Acceptable)		
			83			
			84 City	F	_	Code
11. Pursuant	to the provisions of Sections (607.0502 and 607.1508, Florida Statute	s, the above-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing It	is registered
agent. I a	registered agent, or both, in tr am familiar with, and accept th	ne obligations of, Section 607.0505, Flo	rida Statutes.	ration's board of directors. I hereby accept the ap	pointment as	registereo
SIGNATURE						
	Signature, typed or printed name of regi		Registered Agent signature rec			
12.	OFFICE 1 h	RS AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change	Addition
NAME	PELLOT, SANDRA J		1.1 TITLE 1.2 NAME		L Criainge	CT ADDITION
STREET ADDRESS	3644 PALEFACE PLAC	OF	1.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32					
TITLE	D	☐ DELETE	1.4 City-St-ZIP 2.1 Title		Change	Addition
NAME	PELLOT, VICTOR E		22 NAME			
STREET ADDRESS	3844 PALEFACE PLAC	Æ	2.3 STREET ADDRESS			
CiTY-ST-ZIP	JACKSONVILLE FL 32	210	2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3 4. CITY-ST-ZIP			·
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 C/TY-ST-ZIP			,
TITLE		DELETE	5.1 TITLE	•4.5	Change	☐ Addition
NAME			5.2 NAME]
STREET ADDRESS			5.3 STREET ADDRESS			· 1
CITY-ST-ZIP		7-1 LL: LX	5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			[
STREET ADDRESS	1		6.3 STREET ADDRESS			i
CITY - ST - ZIP			6.4 CITY-ST-ZIP			ŀ

indicated on this annual report or supplier with this little structure and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.