

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000103739

Entity Name: MONTERICO CORP.

FILED  
Aug 10, 2009  
Secretary of State

## Current Principal Place of Business:

177 OCEAN LANE DRIVE STE 911  
KEY BISCAYNE, FL 33149 US

## New Principal Place of Business:

## Current Mailing Address:

P.O.BOX 593478  
MIAMI, FL 331593478 US

## New Mailing Address:

1400 LINCOLN ROAD  
OSCAR REY CPA - SUITE 504  
MAMI BEACH, FL 33139 US

FEI Number: 65-0825669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MESCHEDÉ, RICARDO  
177 OCEAN LANE DRIVE STE 911  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

REY, OSCAR O CPA  
1400 LINCOLN ROAD  
504  
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: OSCAR O REY

08/10/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: KUHN, JOHANNA  
Address: 177 OCEAN LANE DR STE 911  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: P ( ) Delete  
Name: KUHN, ALAN  
Address: 177 OCEAN LANE DR, , SUITE 911  
City-St-Zip: KEY BISCAYNE, FL 33149

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: OSCAR RE

CPA

08/10/2009

Electronic Signature of Signing Officer or Director

Date