2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # S63050

1. Entity Name
MONARCH PROPERTIES, INC.

Principal Place of Business	Mailing Address
1550 NE MIAMI GARDENS DR STE 410 MIAMI, FL 33179 US	1550 NE MIAMI GARDENS DR STE 410 MIAMI, FL 33179 US

DO NOT WRITE IN THIS SPACE

03202008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0318660
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BUDOWSKY, ROBERT
1550 NE MIAMI GARDENS DR
STE 410
MIAMI, FL 33179

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000867185
04/08/08-80059-021 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BUDOWSKY, ROBERT
STREET ADDRESS	1550 NE MIAMI GARDENS DR #410
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT BUDOWSKY 3/20/08 305 944 1025
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #