## 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 #**1. Corporation Name

(6)

MONICA L. ROMERO, INC.

**FILED** May 11 1998 8:00am Secretary of State



<u> </u>							
Principal Place of Business Mailing Address						ALBEL BINET BINET BINET	
975 STONEWOOD LANE 975 STONEWOOD LANE MAITLAND FL 32751 MAITLAND FL 32751					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
2. Principal F	Place of Business	2a. Mailing Address			03/09/1992 4. FEI Number	I lamin	J F
21		26			59-3112604	Applied Not App	plicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.				\$8.75 Additi	
22 27					5. Certificate of Status Desired	Fee Require	
City & State City & State				,	6. Election Campaign Financing	\$5.00 May	Be
23	p Country Z(p		Country		Trust Fund Contribution	Added to Fe	
Zip 24	25	Zip	$\vdash$	ntry	8. This corporation owes or has paid the cur	-	
[24]	25 29 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
BC.	OMERO, MONICA L			81 Name	10, Name and Address of New Hegisterson	· gant	
	5 STONEWOOD LANE			00 0	100 B	W-011	
MAITLAND FL 32751				82 Street Add	fress (P.O. Box Number is Not Acceptable)		Ì
				63	, , , , , , , , , , , , , , , , , , ,		
			ŀ	84 City		85 Zip Code	
					FL	1 1 '	1
I OTTICE OF A	to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with, and accept the oblig	o at Florida. Such change was	outborizor	thu the corners	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appli	changing its reg sintment as regis	istered stered
SIGNATURE		9					
12.	Signature, typiid or printed name of registerio ag OFFICERS AN	ND DIRECTORS	13.	Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN	12
TITLE	PT	DELETE	1.1 []]	LE	ADDITIONO/OFFANGES TO OFF TOESTS AND		Addition
NAME	ROMERO, MONICA L		1.2 NA	ME		• —	[
STREET ADDRESS	975 STONEWOOD LN		1.3 ST	REET ADDRESS			
CITY-ST-ZIP	MAITLAND FL 32751-3255		1.4 08	Y-ST-ZIP			
TITLE	VS	☐ DELETE	2.1 TIT	Lŧ		☐ Change ☐	Addition
NAME	ROMERO, DANIEL A		2.2 NA				
STREET ADDRESS	975 STONEWOOD LN MAITLAND FL 32751-3255			REET ADDRESS			
CITY-ST-ZIP TITLE	MATILANU PL 32/31-3203	DELETE		TY-ST-ZIP			Addition
NAME		F"1 Nere 1E	3.1 TiT			Change	Addition
STREET ADDRESS			3.2 NA	ME REFT ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		DELETE	41 111			☐ Change ☐	Addition
NAME			4. 2 NA			· -	-
STREET ADDRESS			4.3 STF	REET ADDRESS			
CITY - ST - ZIP			4.4 CIT	Y-ST-ZIP			l
TITLE	-	☐ DELETE	5.1 TiT	LE .		Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 STF	REET ADDRESS			Ì
CITY-ST-ZIP		T ne.ear		Y-ST-ZIP		r****	
TITLE		☐ DELETE	6.1 7171			Change	Addition
NAME PERCET ADDRESS			62 NAI				
STREET ADDRESS				REET ADORESS			
14. I hereby c	sertify that the information supplied w	with this fline does not qualify for		Y-ST-ZIP	Section 119 07/3Vi) Florida Statutes   further car	tifu that the inform	motion

Indicated on this annual report or supplied will unishing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 12 or Block 13 if changed, or on an attact ment with an address.

4,29,98 (407)834-3624