

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000005215

**Entity Name:** MONICA SARAN-NACE, INC.

**Current Principal Place of Business:**

30-93 31ST STREET  
ASTORIA, NY 11102

**Current Mailing Address:**

30-93 31ST STREET  
ASTORIA, NY 11102 US

**FEI Number:** 46-0775465

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NACE, MONICA SARAN-  
5855 MIDNIGHT PASS ROAD  
APT. 219  
SARASOTA, FL 34242 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name NACE, MONICA SARAN-  
Address 30-93 31ST STREET  
City-State-Zip: ASTORIA NY 11102

I hereby 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 all other like empowered.

**SIGNATURE:** MONICA SARAN-NACE

**PRESIDENT**

**04/29/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date