State of	of Rhode Island and Pro Office of the Secreta		5 Fee: \$50.00				
Division Of Business Services							
	148 W. River Street						
	Providence RI 02904-2615 (401) 222-3040						
HOPE	· · ·						
Foreign Business Corpora Annual Report Filing Period: January 1 - March 1	ation						
In accordance with R.I.G.L. 7-1.2-							
annual report within thirty (30) day (c&d)) is subject to a penalty fee o		aw (R.I.G.L. 7-1.2-1501					
ANNUAL REPORT YEAR: 2019	<u>-</u>						
1. Corporate ID No. 000135500							
2. Name of Corporation Mona	arch Recovery Management,	Inc.					
3. Street Address Principal Bus	siness Office:						
	MAN DRIVE						
City or Town: <u>SUITE 75</u> BENSALE	EM State:	PA Zip: 19020	Country: USA				
	<u>Stute</u>	<u></u> p. <u></u>	<u>country</u> . <u>cont</u>				
4. Business Phone No.							
<u>215-281-7500</u>							
5. State of Incorporation							
State: <u>PA</u>							
	ARTICLE III						
Enter the six digit NAICS Code the the list of codes here. More inforr			e entity. Download				
<u>561440</u>							
6. Brief Description of the Cha	racter of Business Conducte	d in Rhode Island					
DEBT COLLECTION VIA TH	ELEPHONE, FAX AND MA	<u>.IIL</u>					
7. Names and Addresses of the	7. Names and Addresses of the Officers and Directors:						
All officers and directors mu	All officers and directors must be listed.						
Title	Individual Name	Addres	SS				
	First, Middle, Last, Suffix	Address, City or Town, Stat	e, Zip Code, Country				
PRESIDENT	DIANE MAZZACANO	3260 TILLMAN D BENSALEM, PA 1					
L		,					

TREASURER	WILLIAM FULLER	3260 TILLMAN DRIVE, SUITE 75 BENSALEM, PA 19020 USA
SECRETARY	SHARON MAZZACANO	3260 TILLMAN DRIVE, SUITE 75 BENSALEM, PA 19020 USA
DIRECTOR	DIANE MAZZACANO	3260 TILLMAN DRIVE, SUITE 75 BENSALEM, PA 19020 USA
DIRECTOR	SHARON MAZZACANO	3260 TILLMAN DRIVE, SUITE 75 BENSALEM, PA 19020 USA
DIRECTOR	WILLIAM FULLER	3260 TILLMAAN DRIVE, SUITE 75 BENSALEM, PA 19020 USA
DIRECTOR	ANTHONY MAZZACANO	3260 TILLMAN DRIVE, SUITE 75 BENSALEM, PA 19020 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CWP		\$1.0000	10,000.00	1000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 9 Day of January, 2019 at 1:23:34 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By **DIANE MAZZACANO**

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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