

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Aug 30, 2005 08:00 AM
Secretary of State**

DOCUMENT # F03000003991

1. Entity Name
MRK NETWORKS, INC.



Principal Place of Business
**1011 BROOKSIDE ROAD STE. 120
ALLENTOWN, PA 18106**

Mailing Address
**PO BOX 3150
ALLENTOWN, PA 18106-0150**



08022005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-2853218

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WHITTON, ANTHONY
12095 NW 19 STREET
PLANTATION, FL 33323**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHADICK, RICHARD 1011 BROOKSIDE ROAD STE. 120 ALLENTOWN, PA 18106
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUCK, CHARLES F 1011 BROOKSIDE ROAD STE. 120 ALLENTOWN, PA 18106
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ASSETTO, RICHARD C 1011 BROOKSIDE ROAD STE. 120 ALLENTOWN, PA 18106
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1000000327386
08/30/05-80001-010 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard C. Assetto
Richard C. Assetto

8-25-05

610 366 0090