2005 FOR PROFIT CORPORATION **ANNUAL REPORT** 

**DOCUMENT # G30669** 

## **FILED** Apr 21, 2005 08:00 AM Secretary of State

MERÍSCO, INC.				
1287 E NEWPORT CENTER DR	alling Address 7039 MANDARIN DR 30CA RATON, FL 33433			
DO NOT WRITE IN THIS SPACE		CE	04192005 No Chg-P  4. FEI Number 59-2281469  5. Certificate of Status Desired	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required
6. Name and Address of Current Regis	stered Agent			n. =
MERYL DEUTSCH 7039 MANDARIN DR BOCA RATON, FL 33433		DO NOT WRITE IN THIS SPACE		
8. The above named entity submits this statement for the the obligations of registered agent.  SIGNATURE	purpose of changing its register	ed office or register	red agent, or both, in the State of Flori	da. I am familiar with, and accept
Signature, typed or printed name of registered agent and title if applicable.  (NOTE, Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.			.00 May Be ded to Fees	
10. OFFICERS AND DIRE	CTORS			
TITLE PD	-		The second secon	-

DEUTSCH, MERYL NAME 7039 MANDARIN DR STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL TITLE 000000321937 04/21/05-80098-014 158.75 DEUTSCH, EDWARD NAME STREET ADDRESS 7039 MANDARIN DRIVE CITY-ST-ZIP BOCA RATON, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not quality 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 of 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 TYPET OF PRINTED NAME OF SIG NING OFFICER OR DIRECTOR