

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000011825

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: MERC LLC.

**Current Principal Place of Business:**

692 W 29 ST #9  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

692 W 29 ST #9  
HIALEAH, FL 33012

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

ESCOBAR, MARITZA  
10090 NW 80 CT APT 1320  
HIALEAH, FL 33016 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ESCOBAR, MARITZA  
Address: 10090 NW 80 CT APT 1320  
City-St-Zip: HIALEAH, FL 33016

Title: MGRM ( ) Delete  
Name: CHIRINO, RENE  
Address: 10090 NW 80 CT APT 1320  
City-St-Zip: HIALEAH, FL 33016

Title: MGRM ( ) Delete  
Name: CRUZ, MICHAEL  
Address: 11036 SW 132 CT #3  
City-St-Zip: MIAMI, FL 33186

Title: MGRM ( ) Delete  
Name: ZORRILLA, VERNANCIO  
Address: 290-174 ST NORTH  
City-St-Zip: MIAMI BEACH, FL 33160

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARITZA ESCOBAR

MGR

04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date