


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 10, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # M42479  
 1. Entity Name  
 MERRILL INDUSTRIAL CENTER, INC.



Principal Place of Business C/O EVAN MARBIN 48 E. FLAGLER ST. MIAMI, FL 33131 US	Mailing Address C/O EVAN MARBIN 48 E. FLAGLER ST. MIAMI, FL 33131 US
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**DO NOT WRITE IN THIS SPACE**



02082005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2755577	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 MARBIN, EVAN  
 C/O EVAN MARBIN  
 48 E. FLAGLER ST.  
 MIAMI, FL 33131

**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 \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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 COHEN, HOWARD 501 W. LAKE DASHA DR. PLANTATION, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MARBIN, SHERRIE C 48 EAST FLAGLER ST PENTHOUSE 104 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST COHEN, LAWRENCE D 4 MEADOW ROAD OLD WESTBURY, NY 11568
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 03/10/05-80043-001 150.00

**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: Sherrie Cohen Marbin, VP  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 3/5/05 305 371-2248  
Date Duvine Phone #