


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000099358
1. Entity Name
THE MERRY MAILMAN, INC.



Principal Place of Business Mailing Address
3907 NORTH FEDERAL HWY 3907 NORTH FEDERAL HWY
POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064

DO NOT WRITE IN THIS SPACE



02012005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-1050658 Not Applicable

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

6. Name and Address of Current Registered Agent
GUZIK, JACK R
560 32ND CT SW
VERO BEACH, FL 32968-4133

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

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

00000218558
02/07/05-80089-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GUZIK, JACK R
STREET ADDRESS	560 32ND CT SW
CITY-ST-ZIP	VERO BEACH, FL 329684133
TITLE	D
NAME	GUZIK, MARGARET A
STREET ADDRESS	560 32ND CT SW
CITY-ST-ZIP	VERO BEACH, FL 329684133
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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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)(f), 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: Jack Guzik Date: 2-3-05 Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK GUZIK - PRES.