


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

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



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

Mailing Address
 3907 NORTH FEDERAL HWY
 POMPANO BEACH, FL 33064



02212006 No Chg-P CR2E034 (11/05)

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4. FEI Number
 65-1050658 Applied For
 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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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000450535
 03/10/06-80009-018 150.00

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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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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* JACK GUZIK 2/22/06 954-782 1146
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #