


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90338 027 \*\*\*150.00

<b>DOCUMENT # P03000042125</b>	
1. Entity Name <b>MERC INVESTMENTS INC.</b>	

Principal Place of Business <b>13200 SW 128TH STREET SUITE G3 MIAMI, FL 33175</b> <b>64</b>	Mailing Address <b>13200 SW 128TH STREET SUITE G3 MIAMI, FL 33175</b> <b>64</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



04182005 Chg-P CR2E034 (10/03)

4. FEI Number <b>14-1881645</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>RIBADEO, MANNY 13200 SW 128TH STREET SUITE G3 MIAMI, FL 33175</b> <b>64</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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: Manny Ribadeo (NOTE: Registered Agent signature required when reinstating) DATE: 4/22/05

<b>FILE NOW! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <b>PD</b>	<input type="checkbox"/> Delete	TITLE <b>Ribadeo, Elia Cal</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>RIBADEO, ELIA CAL</b>		NAME <b>18500 SW 100 STREET</b>	
STREET ADDRESS <b>15711 SW 46TH STREET</b>		STREET ADDRESS <b>MIAMI, FL 33196</b>	
CITY-ST-ZIP <b>MIAMI, FL 33185</b>		CITY-ST-ZIP <b>MIAMI, FL 33196</b>	
TITLE <b>SD</b>	<input type="checkbox"/> Delete	TITLE <b>Ribadeo, Manny</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>RIBADEO, MANNY</b>		NAME <b>18500 SW 100 STREET</b>	
STREET ADDRESS <b>15711 SW 46TH STREET</b>		STREET ADDRESS <b>MIAMI, FL 33196</b>	
CITY-ST-ZIP <b>MIAMI, FL 33185</b>		CITY-ST-ZIP <b>MIAMI, FL 33196</b>	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Manny Ribadeo DATE: 4/22/05 (305) 235-3835