

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059744

**FILED**  
**Apr 22, 2004**  
**Secretary of State**

**Entity Name:** MERCHANT BUSINESS SOLUTIONS, INC.

**Current Principal Place of Business:**

20283 STATE ROAD 7 STE 300  
BOCA RATON, FL 33498

**New Principal Place of Business:**

**Current Mailing Address:**

20283 STATE ROAD 7 STE 300  
BOCA RATON, FL 33498

**New Mailing Address:**

FEI Number: 55-0833733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSE, EDEE  
20283 STATE ROAD 7 STE 300  
BOCA RATON, FL 33498

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Change (X) Addition  
Name: ROSE, EDEE  
Address: 20283 STATE ROAD 7, SUITE 300  
City-St-Zip: BOCA RATON, FL 33498

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDEE ROSE

P

04/22/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date