

**2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**May 23, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90225 019 \*\*\*150.00

DOCUMENT # P04000030523  
 1. Entity Name  
**MERCEDES VOTTELER, INC.**



Principal Place of Business      Mailing Address  
 1247 SW 44TH TERR      1247 SW 44TH TERR  
 DEERFIELD BCH FL 33442      DEERFIELD BCH FL 33442

**66018359**



1st MOORE      CR2E034 (10/04)

2. Principal Place of Business      3. Mailing Address  
*6926 NW 32nd Street*      *6926 NW 32nd Street*  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
*Margate Florida*      *Margate, Florida*  
 Zip      Country      Zip      Country  
*33063*      *USA*      *33063*      *USA*  
*Broward*      *Broward*

4. FEI Number      Applied For  
**65-1216994**      Not Applicable  
 5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**VOTTELER, MERCEDES**  
 1247 SW 44TH TERR  
 DEERFIELD BCH FL 33442

7. Name and Address of New Registered Agent  
 Name *Votteler, Mercedes*  
 Street Address (P.O. Box Number is Not Acceptable) *6926 N.W. 32nd Street*  
 City *Margate*      FL      Zip Code *33063*

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 *Mercedes Cristina Votteler*      DATE *02/02/2005*  
Signature, typed by printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	VOTTELER, MERCEDES	
STREET ADDRESS	1247 SW 44TH TERR	
CITY-ST-ZIP	DEERFIELD BCH FL 33442	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Votteler Mercedes	
STREET ADDRESS	6926 N.W. 32nd Street	
CITY-ST-ZIP	Margate, FL 33063	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: *Mercedes Cristina Votteler - Mercedes C. Votteler*      Date *02/02/2005*      (954)5794397  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #