

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000072472

Entity Name: 1020 MERRIMON INC.

FILED  
Apr 04, 2011  
Secretary of State

## Current Principal Place of Business:

11111 BISCAYNE BLVD APT 450  
JOCKEY CLUB BUILDING III  
MIAMI, FL 33181

## New Principal Place of Business:

11111 BISCAYNE BLVD APT 455  
JOCKEY CLUB BUILDING III  
MIAMI, FL 33181

## Current Mailing Address:

11111 BISCAYNE BLVD APT 450  
JOCKEY CLUB BUILDING III  
MIAMI, FL 33181

## New Mailing Address:

11111 BISCAYNE BLVD APT 455  
JOCKEY CLUB BUILDING III  
MIAMI, FL 33181

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HELLMUND, LUIS A  
11111 BISCAYNE BLVD #1812  
MIAMI, FL 33181    US

## 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

## OFFICERS AND DIRECTORS:

Title:                      DP  
Name:                      DEGWITZ, CARMEN H  
Address:                      11111 BISCAYNE BLVD APT 455  
City-St-Zip:                      MIAMI, FL 33181

Title:                      VT  
Name:                      HELLMUND, LUIS N A  
Address:                      11111 BISCAYNE BLVD APT 455  
City-St-Zip:                      MIAMI, FL 33181

Title:                      AS  
Name:                      FABRE, FRANK R.S.  
Address:                      11111 BISCAYNE BLVD APT 455  
City-St-Zip:                      MIAMI, FL 33181

I hereby 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 all other like empowered.

SIGNATURE: LUIS ALEJANDRO HELLMUND

VT

04/04/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date