2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 469796

Entity Name: MERCHANTS EXPORT, INC.

FILED Jan 11, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	IARTIN LUTHI BEACH, FL 33	ER KING JR. BLVD. 14047506			
Current Mailing Address:			New Mailing Address:		
	IARTIN LUTHI BEACH, FL 33	ER KING JR. BLVD. 4047506			
FEI Number: 59-1630047 FEI Number Applied For ()		FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	d Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:	
1240 N.O	MARIA M ST CEAN WAY H, FL 33480	US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	jent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	AMENGUAL, ÎS	TE SMITH BAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (COLLIER, TEF 1240 N.OCEAI PALM BCH., F	N WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST (COLLIER, MAI 1240 N OCEAI PALM BEACH,	N WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ULLIAN, JEFF	N HAWK TRAIL SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	1VP (COLLIER, NAT 1240 N OCEAI PALM BEACH,	N WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	2VP (COLLIER, CAF 1240 N OCEAI PALM BEACH,	N WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MARIA M. COLLIER ST 01/11/2005