## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 728381** 

Entity Name: MECE, INC.

FILED Jan 26, 2006 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	NER BLVD. ON, FL 33432					
Current Mailing Address:			New Mailir	New Mailing Address:		
	NER BLVD. ON, FL 33432					
FEI Number:	59-1483850	FEI Number Applied For ( )	FEI Number Not Appli	licable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
GARCIA, LI 3190 LEEW APT. L104 BOCA RAT		US				
The above in the State		ubmits this statement for the pur	pose of changing it	its registered office or registered agent, or both,		
SIGNATUR	E:					
	Electronic	Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E GALINSKIE, HOL 11826 PRESERV BOCA RATON, F	/ATIONS LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () E CROMARTY, VIC 540 NE 18TH S' BOCA RATON, FI	TREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () E MONACO, JAMIE 371 S. COUNTRY BOCA RATON, FI	Y CLUB BL.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () E NOELK, DEBBIE 55 SW 13TH AV BOCA RATON, F		Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition NOELK, DEBBIE 55 SW 13TH AV BOCA RATON, FL 33486		
Title: Name: Address: City-St-Zip:	P () E COFFER, PREST 2885 NW 29TH D BOCA RATON, F	DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	S () E TORANO, STEPH 4823 NW TWENT BOCA RATON, FI	TY-FIFTH WAY	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MCCLOSKEY, JOHN 839 SEVILLA DRIVE BOCA RATON, FL 33432		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA C. GARCIA DIR 01/26/2006