

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 02, 2005 08:00 AM
Secretary of State

DOCUMENT # F00847 1. Entity Name MERCURY PRINTERS AND PROMOTIONS, INC.	
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Principal Place of Business 1010 VIRGINIA DRIVE C/O MURRAY SCHWARTZ ORLANDO, FL 32803	Mailing Address 1010 VIRGINIA DRIVE C/O MURRAY SCHWARTZ ORLANDO, FL 32803
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05312005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2030130	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent SCHWARTZ, RICHARD 1010 VIRGINIA DRIVE ORLANDO, FL 32803
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**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

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

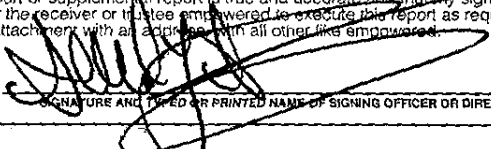
10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHWARTZ, RICHARD 1010 VIRGINIA DRIVE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PRITCHARD, RANDALL 1010 VIRGINIA DR. ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000368850
06/02/05-80001-015 550.00

U00000368850
06/02/05-80001-016 8.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  5-31-05 (407) 894-5963
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #