

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2004 8:00 am
Secretary of State

09-02-2004 90072 015 ***550.00

DOCUMENT # F02000002467

1. Entity Name
MERS MARKETING CORP.



Principal Place of Business
**296 EAST JERICO TPKE
HUNTINGTON STATION, NY 11746**

Mailing Address
**296 EAST JERICO TPKE
HUNTINGTON STATION, NY 11746**



2. Principal Place of Business
4475 Northlake Blvd.
Suite, Apt. #, etc.

3. Mailing Address
4475 Northlake Blvd.
Suite, Apt. #, etc.

07292004 Chg-P CR2E034 (10/03)

City & State
Palm Beach Gardens, FL
Zip
33410
Country
USA

City & State
Palm Beach Gardens, FL
Zip
33410
Country
USA

4. FEI Number
11-3234736

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MARCHISOTTO, ROMOLO
8500 VIA-ROMANA #2
BOCA RATON, FL 33496-1958**

7. Name and Address of New Registered Agent

Name
Romolo Marchisotto
Street Address (P.O. Box Number is Not Acceptable)
4475 Northlake Blvd.
City
Palm Beach Gardens **FL** Zip Code
33410

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

Romolo Marchisotto

8/30/2004

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 8, 2004**

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
**PC
MARCHISOTTO, ROMOLO
296 EAST JERICO TPKE
HUNTINGTON STATION, NY 11746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Romolo Marchisotto
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/30/2004
Date

561 799 7899
Daytime Phone #