

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90384 045 ***150.00

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01092006 Chg-P CR2E034 (11/05)

DOCUMENT # F04000002088 1. Entity Name MERIDA MERIDIAN, INC.					
Principal Place of Business 5700 COMMONS PARK, TOWPATH COMMONS ROAD EAST SYRACUSE, NY 13057			Mailing Address 5700 COMMONS PARK, TOWPATH COMMONS ROAD EAST SYRACUSE, NY 13057		
2. Principal Place of Business <i>643 Summer St</i>		3. Mailing Address <i>643 Summer St</i>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <i>Boston MA</i>		City & State <i>Boston MA</i>		4. FEI Number 16-1105538	
Zip <i>02210</i>		Country 		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD SAMEL, HIRAM M <input type="checkbox"/> Delete 5700 COMMONS PARK, TOWPATH COMMONS ROAD EAST SYRACUSE, NY 13057		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Controller <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Robert Segal 643 Summer Street Boston, MA 02210	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD <input checked="" type="checkbox"/> Delete MELTZER, SANFORD 5700 COMMONS PARK, TOWPATH COMMONS ROAD EAST SYRACUSE, NY 13057		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>General Mgr</i> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <i>4/21/06</i> Daytime Phone # <i>614-464-5420</i>		