

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F46232 (7)

1. Corporation Name
MERO INVESTMENTS, INC.



Principal Place of Business 70414 CANTERBURY DR SUITE 803 RICHMOND MI 48062 US	Mailing Address P.O. BOX 435 SUITE 803 RICHMOND MI 48062 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/28/1981

2. Principal Place of Business 21 70414 Canterbury Dr. Suite, Apt. #, etc. 22 _____ City & State 23 Richmond, MI Zip 24 48062 Country 25 U.S.A.	2a. Mailing Address 26 P.O. Box 435 Suite, Apt. #, etc. 27 _____ City & State 28 Richmond, MI Zip 29 48062 Country 30 U.S.A.
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4. FEI Number 59-2144025	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ROMERO, MANUEL R
 1010 SOUTH OCEAN BOULEVARD
 POMPANO BEACH, FL
 33062**

10. Name and Address of New Registered Agent

81 Name E. E. Jordan	
82 Street Address (P.O. Box Number is Not Acceptable) 650 S.E. 3rd Avenue	
83 _____	
84 City Ft. Lauderdale	85 Zip Code FL 33301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *E.E. Jordan* **E.E. Jordan** DATE: **MAR 11 1998**

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

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	ROMERO, MARIA	
STREET ADDRESS	1010 S OCEAN BOULEVARD	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	ROMERO, MANUEL R	
STREET ADDRESS	1010 S OCEAN BOULEVARD	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ROMERO, MANUEL A	
STREET ADDRESS	70414 CANTERBURY DR	
CITY-ST-ZIP	RICHMOND MI	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	P/V ROMERO, MANUEL A.
2.3 STREET ADDRESS	70414 Canterbury Dr.
2.4 CITY-ST-ZIP	RICHMOND MI 48062
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Manuel A. Romero* **Manuel A. Romero** **4/7/98 (619) 727-8026**

CR2E034 (10/97)