2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001891

Entity Name: MERO STRUCTURES, INC.

FILED Feb 23, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
N126 N8585 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051				W126 N8585 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051		
Current Mailing Address:				New Mailing Address:		
N126 N8585 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051				W126 N8585 WESTBROOK CROSSING MENOMONEE FALLS, WI 53051		
FEI Number:	El Number: 36-3455539 FEl Number Applied For() FE		FEI Num	Number Not Applicable ()		Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and	Address of I	New Registered Agent:
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US						
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.						
SIGNATURE:						
Electronic Signature of Registered Agent				Date		
Election Cam	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	KLOSE, R. DR. STEINACHSTRA	Delete .SSE 5, POSTFACH 6169 IRG 1, GERMANY,		Title: Name: Address: City-St-Zip:	BROCK, R CL/ W126 N8585 V	() Change () Addition AYTON WESTBROOK CROSSING FALLS, WI 53051
Title: Name: Address: City-St-Zip:	COLLINS, IAN E WW126 N8585	Delete DR. WESTBROOK CROSSING ALLS, WI 53051		Title: Name: Address: City-St-Zip:	COLLINS, IAN W126 N8585 V	() Change () Addition DR. WESTBROOK CROSSING FALLS, WI 53051
Title: Name: Address: City-St-Zip:	ROSSMANITH, J	SSE 5 P.O. BOX 6169		Title: Name: Address: City-St-Zip:	FROEHLICH, J W126 N8585 V	() Change () Addition JOSEPH WESTBROOK CROSSING FALLS, WI 53051
Title: Name: Address: City-St-Zip:	ANDERSON, KE W126 N8585 W	Delete NT J ESTBROOK CROSSING ALLS, WI 53051		Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	PETEROSN, TE	STBROOK CROSSING		Title: Name: Address: City-St-Zip:	PETERSON, T	() Change ()Addition ERRY WESTBROOK CROSSING

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: K. J. ANDERSON VP 02/23/2005