


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # M29579 1. Entity Name MERCIS HOME CORP.	
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Principal Place of Business 4291 SW 9TH TERRACE MIAMI, FL 33134	Mailing Address 4291 SW 9TH TERRACE MIAMI, FL 33134
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DO NOT WRITE IN THIS SPACE



04102006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2654261	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AGUIAR, MIRIAM
10249 SW 139TH COURT
MIAMI, FL 33186

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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	DPT AGUIAR, ALBERTO JR. 541 WINSTON DR. MELROSE PARK, IL 60160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS AGUIAR, MIRIAM 10249 SW 139 CT. MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, ISABEL 4279 S.W. 9TH TERRACE MIAMI, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: Miriam Aguiar MIRIAM AGUIAR 04/15/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #