

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000021973	
1. Entity Name MERVILLE ENTERPRISES INC.	

Principal Place of Business 4970 N.W. 6TH STREET COCONUT CREEK, FL 33063	Mailing Address 4970 N.W. 6TH STREET COCONUT CREEK, FL 33063
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03222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0990377	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LEWIS, RHONDA K 7737 N. UNIVERSITY DRIVE SUITE 104 TAMARAC, FL 33321
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**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature of registered agent or authorized officer of the corporation NOTE: Registered agent must sign and print name and address DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

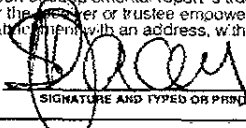
9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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U00000036910
03/26/04-80017-018 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	P FACEY, MERLENE S 4970 NW 6TH STREET COCONUT CREEK, FL 33063
TITLE NAME STREET ADDRESS CITY ST ZIP	S FACEY, ORVILLE D 4970 NW 6TH STREET COCONUT CREEK, FL 33063
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 officer 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 affidavit with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3 - 24 04
Date of filing