

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 24, 2005 8:00 am
Secretary of State

06-24-2005 90001 048 ***550.00

DOCUMENT # P00000027723 1. Entity Name MERGENET SOLUTIONS, INC.					
Principal Place of Business 23257 STATE ROAD SEVEN #207 BOCA RATON, FL 33428			Mailing Address 23257 STATE ROAD SEVEN #207 BOCA RATON, FL 33428		
2. Principal Place of Business 6601 Lyons Road		3. Mailing Address 6601 Lyons Road			
Suite, Apt. #, etc. B1-B4		Suite, Apt. #, etc. B1-B4			
City & State Coconut Creek, Florida		City & State Coconut Creek, Florida			
Zip 33073	Country USA	Zip 33073	Country USA	4. FEI Number 65-0995964	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LERNER, ALAN M 2888 EAST OAKLAND PARK BOULEVARD FORT LAUDERDALE, FL 33306			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 <u>Allan M. Lerner</u> June 20, 2005 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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	CEO HERNANDEZ, SHARA A ☐ Delete 23257 STATE ROAD SEVEN #207 BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Hernandez, Shara A ☒ Change ☐ Addition 6601 Lyons Road, Suite B1-B4 Coconut Creek, FL 33073	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHER, BRUCE M ☐ Delete 23237 STATE ROAD 7 #207 BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Sher, Bruce M ☒ Change ☐ Addition 6601 Lyons Road, Suite B1-B4 Coconut Creek, FL 33073	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 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: Shara A. Hernandez			June 20, 2005		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		