2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000104667

FILED Sep 10, 2009 Secretary of State

Entity Nan	ne: MERCA (CENTER, INC.			
Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
696 NE 85TH ST., APT. 1 MIAMI, FL 33138			101	480 NE 30TH ST. 101 MIAMI, FL 33137	
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
480 NE 30 ⁻ MIAMI, FL	TH ST., #101 33137		480 NE 30TH ST 101 MIAMI, FL 33137		
FEI Number:	65-1054015	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addr	Name and Address of New Registered Agent:	
480 NE 30 ⁻), CARMEN TH ST., #101 33137 US				
The above in the State		submits this statement for the	ourpose of changing its regi	stered office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () NAVARRO, JOS 480 NE 30TH S MIAMI, FL 331	T., #101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () ARDILA, JUAN 480 NE 30TH S MIAMI, FL 331	•	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: HUMBERTO NAVARRO PD 09/10/2009