

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000024657	
1. Entity Name MER-KEL, INC.	
Principal Place of Business 6409 RALEIGH ST. ORLANDO, FL 32835	Mailing Address 8 WESTERN AVE #14 KENNEBUNK, ME 04043



DO NOT WRITE IN THIS SPACE

07042007 No Chg-P CR2E034 (11/05)

4. FEI Number 27-0003453	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 KELLY, ROBERT J 15613 GREATER GROVE BLVD CLERMONT, FL 34711
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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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST KELLY, ROBERT J 15613 GREATER GROVES BLVD CLERMONT, FL 34714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT KELLY, ROBERT J 15613 GREATER GROVES CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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07/16/07-80002-011 150.00

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IN THIS SPACE**

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: Robert J. Kelly 7/16/07 407 296-9670
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #