


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 02, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000061295 1. Entity Name MRK OVERSEAS INVESTMENTS, INC.	
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Principal Place of Business 5000 SE 183RD AVENUE ROAD OCKLAWAHA, FL 32179	Mailing Address 5000 SE 183RD AVENUE ROAD OCKLAWAHA, FL 32179
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06072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0523249	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 GOVONI, HARDING & ASSOCIATES, INC. 505 AVE A NW STE 102 WINTER HAVEN, FL 33881
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000163057 07/02/04-80002-016 550.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENDRY, MARK 5000 SE 183RD AVENUE ROAD OCKLAWAHA, FL 32179
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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)(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: Mark Kendry **7/4/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #