2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000066728

1. Entity Name
MERAL INC

50059298

Principal Place of Business	Mailing Address
3100 N. PALMAIRE DRIVE SUITE 508 POMPANO BEACH, FL 33069	3100 N. PALMAIRE DRIVE SUITE 508 POMPANO BEACH, FL 33069

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country	Zip	Country

07192005   Chg-P   CR2E034 (10/03)

4. FEI Number
51-0418745

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
UCKUN, MERAL 3100 N. PALMAIRE DRIVE SUITE 508 POMPANO BEACH, FL 33069	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 _____

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 7, 2005

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		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	UCKUN, MERAL		NAME		
STREET ADDRESS	3100 N. PALMAIRE DRIVE, SUITE 508		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33069		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: _(MERAL UCKUN)_ 7/26/05 954-974-8865

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

ATTACHMENT

$\mathcal{S0.05938}$

Division of Corporations

Annual Report

Annual Report Help

Document Number
P02000066728
Business Entity Name
MERAL INC

☑ After May 1st of each year, a late charge of $400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if filing after May 1st and notice was not received.

FEI Number	51041874
FEI Number Status	○ Applied For ○ Not Applicable ● Current
Certificate of Status Desired	○ Yes ● No $8.75 each
Election Campaign Financing Trust Fund Contribution	○ Yes ● No

Principal Place of Business

Address	3100 N. PALMAIRE DRIVE
Suite, Apt. #, etc.	SUITE 508
City, State	POMPANO BEACH , FL
Zip Code & Country	33069

Mailing Address

Address	3100 N. PALMAIRE DRIVE
Suite, Apt #, etc.	SUITE 508
City, State	POMPANO BEACH , FL
Zip & Country	33069

Name And Address of Registered Agent

Name (Last, First, Middle, Title)	UCKUN , MERAL . .
-or- R/A Business Name	
Address (P.O. Box is not acceptable)	3100 N. PALMAIRE DRIVE
Suite, Apt.	SUITE 508
City, State	POMPANO BEACH , FL
Zip Code & Country	33069 US

ATTACHMENT

P02000066728

S005929 8

-or- Entity Name

Street Address

City. State

Zip Code & Country

Title

Name (Last. First, Middle, Title)

-or- Entity Name

Street Address

City. State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer Director Signature' block below. A corporate name is not allowed in this block.

Title   President

Officer Director Signature

This signature must be that of the individual "signing" this document electronically, be made with the full knowledge and permission of the individual. otherwise it constitutes **forgery** under s.831 06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

| Continue | Reset |

| Start Over |

ATTACHMENT

P02 000006728

S0 059298

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature |_

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06. Florida Statutes.

Officer/Director Name And Address

Title	D
Name (Last, First, Middle, Title)	UCKUN .MERAL
-or- Entity Name	
Street Address	3100 N. PALMAIRE DRIVE, SUITE 508
City, State	POMPANO BEACH .FL
Zip Code & Country	33069
Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	