

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000099126

FILED
Apr 28, 2006
Secretary of State

Entity Name: MEHLER CAPITAL MANAGEMENT, INC.

Current Principal Place of Business:

17826 NW 16TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

2999 NE 191 STREET
SUITE 601
AVENTURA, FL 33180

Current Mailing Address:

17826 NW 16TH STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

2999 NE 191 STREET
601
AVENTURA, FL 33180

FEI Number: 43-1973614

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEHLER, STUART A
17826 NW 16TH STREET
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

MEHLER, STUART A
2999 NE 191 STREET
601
AVENTURA, FL 33180 US

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.

SIGNATURE:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEHLER, STUART A
Address: 17826 NW 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEHLER, STUART A
Address: 2999 NE 191 STREET SUITE 601
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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: STUART A. MEHLER

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date