

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000032999

Entity Name: MEPAS, INC.

FILED
Feb 16, 2006
Secretary of State

Current Principal Place of Business:

3213 KINGS ONE S. AVENUE
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

3213 KINGS ONE S. AVENUE
BRANDON, FL 33511

New Mailing Address:

FEI Number: 56-2358119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MEYER, SOFIA M
Address: 3213 KINGS ONE S. AVENUE
City-St-Zip: BRANDON, FL 33511

Title: VD () Delete
Name: MEYER, MARCO
Address: 3213 KINGS ONE S. AVENUE
City-St-Zip: BRANDON, FL 33511

Title: VTD () Delete
Name: MEYER, PATRICK J
Address: 3213 KINGS ONE S. AVENUE
City-St-Zip: BRANDON, FL 33511

Title: SD () Delete
Name: MEYER, WILLIAM
Address: 3213 KINGS ONE S. AVENUE
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: OFFICER SIGNATURE

PD

02/16/2006

Electronic Signature of Signing Officer or Director

_____ Date