2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMEN # P03000083692 1. Entity Name						A 4 4	A	Jan 27,	2005	08:0	0 AM
MRH7, INC.			_				0.00	Seci	retary	of St	ate
MINIT, INC.			•	•			7				
Principal Place of Business			Mailin	Mailing Address							
•	EZ ROAD #41		9604 CORTEZ ROAD #411								
BRADENTON FL 34210			BRAD	BRADENTON FL 34210							
	_			. * <u>**</u> :)) 77 2)) 77 1) 77 1		
2. Principal P	Place of Busines	3. Mai	3. Mailing Address								
Suite, Apt. #, etc.			Sunte	Suite, Apt. #, etc.				t MOORE	CR2E034	1 (10/04)	
											 -
City & State			City	City & State			4. FEi Numb	^{oer} 06-170404	16	<u> </u>	pplied For lot Applicable
Zip Country			Zip		ntry	5. Certificate	e of Status Desired		\$8.75 Ad	lditional	
6. Name and Address of Current			ant Beginters	Perintered Agent			7. Name and Address of New Registered Agent				
	o, Ivallie al	cili Hedistele	C AGOIN	Name	7. Rame and	Addiess Of Hear	registoreu	Agent			
HAL	LLAM, MICI		Street Ar			ess (P.O. Box Number is Not Acceptable)					
	4 CORTEZ ADENTON I										
				City		+ + 3.	FI	Zip Cod	de 		
	named entity s tions of register	submits this statement ad agent.	nt for the purp	ose of changing its	register	ed office or regis	tered agent, or bo	oth, in the State of F	lorida. I am	familiar with	, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE											
			учи вполич и арр	made (NOTE	negistere	a Agent signature redu	inger which tenestrated		DA!E		
After	May 1, 2005	FEE IS \$150.00 Fee Will Be \$550 Torida Departmen	t of State					9. Election Camp Trust Fund Co	~		.00 May Be led to Fees
10.		A STATE OF THE PARTY OF THE PAR	ND DIRECTO	RS	11.	- <u></u>	ADDITIONS	/CHANGES TO OF	FICERS AN	D DIRECTOR	SIN 11
TITLE	D			☐ Delete	TITL	1		0000001 01/27/05-8	(33508 ?0100-0	Change	Addition
NAME Street Address	HALLAM, MI	CHAEL R Z ROAD #411			LE I AODRESS		011 11 00 0	inton n	OO TOUR		
CITY-ST-ZIP	BRADENTON					-SI-ZIP					
TITLE				☐ Delete	mu	i	<u> </u>	<u></u>		☐ Change	Addition
NAME STREET ADDRESS					NAM STRE	EET ADDRESS					
CITY- ST-ZIP						- ST - ZIP					
title				☐ Delete	1/1/		<u> </u>			Change	Addition
NAME STREET ADDRESS					NAM STRE	EF ACORESS					
CITY ST-ZIP						- ST- ZIP					
TITLE				☐ Delete	TULL	·	-			☐ Change	Addition
NAME STREET ADDRESS					NAM STRE	EET ADORESS					
CITY-SI-ZIP			2		Ŧ	'- SI - ZIP					
UTLE				☐ Delete	TITU	1				☐ Change	☐ Addition
NAME Street Address					NAM SIDE	ET ADDRESS					
City-\$1-Zip						-ST-ZIP					
TITLE				☐ Delete	TITL	F				☐ Change	Addition
NAME					NAM SID	ļ.					
STREET ADDRESS CITY-ST-ZIP						FFT ADDRESS '-ST-ZIP					
12. I hereby o	certify that the ir	nformation supplied s	with this filing	does not qualify for	the exe	mption stated in	Section 119,07(3)	(i), Florida Statutes	I further ce	rtify that the	information
indicated of the cor	d on this report or rporation or the	or supplemental repo receiver or trustee ej	ont is true and papowered to	accurate and that n execute this report	ny signa as requi	iture shall have thi ired by Chapter (ne same legal effe 507, Flonda Statut	ict as it made under les; and that my nar	r pain; that I ne appears	am an onice in Block 10 c	or Block 11 if
changed, or on an attachment with an address, with all other like empowered SIGNATURE: -25-05 94 338 806 2											
SIGNAT	TURE: 🟒	SIGNATURE AND TYPED	OD DDINYED VA	IE OE SIGNING OF GOTO	OB DIRECT	TOP		25-05	741 a	38 80 Davume Phone #	62
•		SOURCE AND TIPED!	ON FRANCE NAME.	IL OF SIGNAMU OFFICER I	un uinet					- CONTRACTOR	

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