2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000092845

Entity Name: H. MER INVESTMENT SERVICES, CORP.

FILED May 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

Current Mailing Address: New Mailing Address:

FEI Number: 20-0178715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 SORDO, MARIO
 SORDO, MARIO

 819 N 31 CT
 18101 SW 296 STREET

 HOLLYWOOD, FL 330021 US
 MIAMI, FL 33030 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: MARIO SORDO 05/02/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete

Title:

Title: P (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 SORDO, MARIO
 Name:
 SORDO, MARIO

 Address:
 819 N 31 CT
 Address:
 18101 SW 296 STREET

 City-St-Zip:
 HOLLYWOOD, FL 33021 US
 City-St-Zip:
 MIAMI, FL 33030 US

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 AMADOR, LAZARO MARIMON
 Name:
 CAVERO, RENEE

 Address:
 819 N 31 CT
 Address:
 18101 SW 296 STREET

 City-St-Zip:
 HOLLYWOOD, FL 33021 US
 City-St-Zip:
 MIAMI, FL 33030 US

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 CAVERO, RENEE
 Name:
 VILLAMARIN, LAZARO

 Address:
 819 N 31 CT
 Address:
 18101 SW 296 STREET

 City-St-Zip:
 HOLLYWOOD, FL 33021 US
 City-St-Zip:
 MIAMI, FL 33030 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIO SORDO PRES 05/02/2005