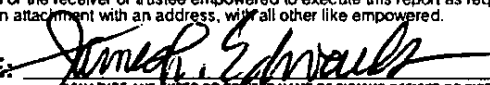


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-06-2005 90114 015 ***158.75

DOCUMENT # P04000093312					
1. Entity Name MERITLINKS USA, INCORPORATED					
Principal Place of Business 5196 41ST STREET SOUTH ST. PETERSBURG FL 33711			Mailing Address 5196 41ST STREET SOUTH ST. PETERSBURG FL 33711		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 56-2473435				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent EDWARDS, JAMES L. 5196 41ST STREET SOUTH ST. PETERSBURG FL 33711				7. Name and Address of New Registered Agent	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			"D" INDICATES "DIRECTOR"		
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE	☐ Delete				
NAME	D EDWARDS, JAMES L.				
STREET ADDRESS	5196 41ST STREET SOUTH				
CITY- ST- ZIP	ST. PETERSBURG, FL 33711				
TITLE	☐ Delete				
NAME	D KOWENSKI, LISA K.				
STREET ADDRESS	10190 109TH STREET NORTH				
CITY- ST- ZIP	SEMINOLE, FL 33772				
TITLE	☐ Delete				
NAME	D SWAIN, CYNTHIA A.				
STREET ADDRESS	6914 12TH TERRACE NORTH				
CITY- ST- ZIP	ST. PETERSBURG, FL 33710				
TITLE	☐ Delete				
NAME	D SWAIN, NORMAN R.				
STREET ADDRESS	6914 12TH TERRACE NORTH				
CITY- ST- ZIP	ST. PETERSBURG, FL 33710				
TITLE	☐ Delete				
NAME	D EDWARDS, TIFFANY A.				
STREET ADDRESS	5196 41ST STREET SOUTH				
CITY- ST- ZIP	ST. PETERSBURG, FL 33711				
TITLE	☐ Delete				
NAME	D EDWARDS, GEORGE M.				
STREET ADDRESS	5001 LAKE FRONT DRIVE-B2				
CITY- ST- ZIP	TALLAHASSEE, FL 32303				
10. CONTINUED					
TITLE	☐ Change ☐ Addition				
NAME	D EDWARDS, STEPHANIE L.				
STREET ADDRESS	5001 LAKE FRONT DRIVE-B2				
CITY- ST- ZIP	TALLAHASSEE, FL 32303				
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
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:  April 22, 2005 (62) 866-2183					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					