


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90287 045 ***150.00

DOCUMENT # P04000119041	
1. Entity Name ME CARD INDUSTRIES INC	

Principal Place of Business 1611 12TH ST E SUITE G PALMETTO, FL 34221	Mailing Address 1611 12TH ST E SUITE G PALMETTO, FL 34221
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14011156



2. Principal Place of Business 808 35th Ave. Dr. W.	3. Mailing Address 808 35th Ave. Dr. W.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Palmetto, FL	City & State Palmetto, FL
Zip 34221	Zip 34221
Country USA	Country USA

03312005 Chg-P CR2E034 (10/03)

4. FEI Number 86-1113660	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent DEROSIA, BRADLEY D 1611 12TH ST E SUITE G PALMETTO, FL 34221
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7. Name and Address of New Registered Agent Name John H. Chasey II Street Address (P.O. Box Number is Not Acceptable) 808 35th Ave. Dr. W. City Palmetto FL Zip Code 34221

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 **Bradley D. DeRosia** (NOTS: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable. DATE **Apr 26/05**

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME DEROSIA, BRADLEY D		NAME	
STREET ADDRESS 2927 LONG RIFLE DRIVE		STREET ADDRESS	
CITY - ST - ZIP WIMAUMA, FL 34221		CITY - ST - ZIP	
TITLE VP	<input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME CHASEY, JOHN		NAME	
STREET ADDRESS 808 35TH AV DR W		STREET ADDRESS	
CITY - ST - ZIP PALMETTO, FL 34221		CITY - ST - ZIP	
TITLE SEC	<input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME BUTLER, HUGH E		NAME	
STREET ADDRESS 1734 RIDGEWAY DRIVE		STREET ADDRESS	
CITY - ST - ZIP CLEARWATER, FL 33755		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: **John H. Chasey II**
Signature and typed or printed name of signing officer or director Date **4-25-05** Daytime Phone #