

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067865

Entity Name: MERUSA II, INC.

FILED
Jan 24, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 990998
NAPLES, FL 34116

New Principal Place of Business:

2381 6TH AVENUE, NE
NAPLES, FL 34120

Current Mailing Address:

P.O. BOX 990998
NAPLES, FL 34116

New Mailing Address:

FEI Number: 20-2833884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRIGID D. SOLDVINI, CPA, P.A.
5455 JAEGER ROAD
NAPLES, FL 34109 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: P () Delete
Name: BARRENECHE, RODOLFO J
Address: P.O. BOX 990998
City-St-Zip: NAPLES, FL 34116

Title: VP () Delete
Name: BARRENECHE, MARGARITA M
Address: P.O. BOX 990998
City-St-Zip: NAPLES, FL 34116

Title: TREA () Delete
Name: BARRENECHE, MARGARITA M
Address: P.O. BOX 990998
City-St-Zip: NAPLES, FL 34116

Title: SEC () Delete
Name: BARRENECHE, RODOLFO J
Address: P.O. BOX 990998
City-St-Zip: NAPLES,, FL 34116

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: MARGARITA BARRENECHE

VP

01/24/2007

Electronic Signature of Signing Officer or Director

Date