

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067865

Entity Name: MERUSA II, INC.

FILED  
Apr 21, 2008  
Secretary of State

## Current Principal Place of Business:

5455 JAEGER ROAD  
NAPLES, FL 34109 US

## New Principal Place of Business:

9577 TAMIAMI TRAIL N.  
NAPLES, FL 34108 US

## 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: TREA (X) Change ( ) Addition  
Name: BARRENECHE, RODOLFO J  
Address: P.O. BOX 990998  
City-St-Zip: NAPLES, FL 34116

Title: SEC (X) Change ( ) Addition  
Name: BARRENECHE, MARGARITA  
Address: P.O. BOX 990998  
City-St-Zip: NAPLES,, FL 34116

I hereby certify that the information supplied with this filing does not qualify 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

04/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date