2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000068819

Entity Name: MERCURY RISING DELIVERY SERVICE INC

FILED Aug 18, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

15603 MORNING DR 14616 PINE GLEN CIR LUTZ, FL 33559 LUTZ, FL 33559

Current Mailing Address: New Mailing Address:

 15603 MORNING DR
 14616 PINE GLEN CIR

 LUTZ, FL 33559
 LUTZ, FL 33559

FEI Number: 06-1747810 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:

HATFIELD, DUSTIN

3600 E FLETCHER AVE APT 39

TAMPA, FL 33613 US

HATFIELD, MICHELLE
14616 PINE GLEN CIR
LUTZ, FL 33559 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: MICHELLE HATFIELD 08/18/2006

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:

Title:

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

 Name:
 HATFIELD, LEROY
 Name:
 HATFIELD, MICHELE

 Address:
 15603 MORNING DR
 Address:
 14616 PINE GLEN CIR

 City-St-Zip:
 LUTZ, FL 33559
 City-St-Zip:
 LUTZ, FL 33559

Title: VP () Delete Title: VP (X) Change () Addition Name: HATFIELD, DUSTIN Name: HATFIELD, DAWN

Name:HATFIELD, DUSTINName:HATFIELD, DAWNAddress:3600 E FLETCHER AVE #39Address:14616 PINE GLEN CIRCity-St-Zip:TAMPA, FL 33613City-St-Zip:LUTZ, FL 33559

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

 Name:
 HATFIELD, MICHELLE
 Name:

 Address:
 15603 MORNING DR
 Address:

 City-St-Zip:
 LUTZ, FL 33559
 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: MICHELLE HATFIELD P 08/18/2006