

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2006 8:00 am
Secretary of State

05-30-2006 90038 006 ***150.00

DOCUMENT # P05000084266 1. Entity Name MERCOOD, INC.					
Principal Place of Business 700 NE 90 ST MIAMI, FL 33138			Mailing Address 700 NE 90 ST MIAMI, FL 33138		
2. Principal Place of Business 12550 Biscayne Blvd Suite, Apt. #, etc. 500		3. Mailing Address 12550 Biscayne Blvd Suite, Apt. #, etc. 500			
City & State North Miami FL		City & State North Miami		4. FEI Number 20-2981203	
Zip 33181		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent OLIVEIRA, ANDREA 700 NE 90 ST MIAMI, FL 33138				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) 12550 Biscayne Blvd Ste 500 City North Miami FL Zip Code 33181	
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 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OLIVEIRA, ARTHUR 190 NE 90 ST, APT 5 MIAMI, FL 33138 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP OLIVEIRA, ANDREA 376 NE 90 ST MIAMI, FL 33138 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T CRUZ-SOLANO, ORLANDO 376 NE 90 ST MIAMI, FL 33138 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					

40094545



05162006 Chg-P CR2E034 (11/05)

ATTACHMENT

40094545

Mercood, Inc.
12550 Biscayne Boulevard, Suite 500
North Miami, FL 33181
305-469-3926

May 16, 2006

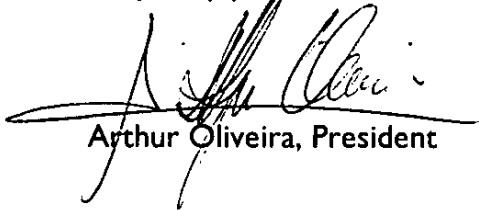
Florida Department of State
PO Box 1500
Tallahassee, FL 32302

RE: Mercood, Inc. P05000084266

Gentlemen:

Please find enclosed our check for \$150 to pay for the 2006 Annual Report. We did not receive the original renewal form since we had moved. Please waive the penalty fee.

Very truly yours



Arthur Oliveira, President

ATTACHMENT
BISCAYNE BUSINESS CENTER
EXECUTIVE OFFICES

Furnished or Unfurnished offices • Desk Space • Business Identities • Notary Public
Mail Forwarding • Conference Rooms • Fax • Telephone Answering

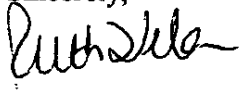
40094545
#P05000084266

INTEROFFICE MEMORANDUM

TO: MERCOOD, INC
FROM: BISCAYNE BUSINESS CENTER, INC
12550 BISCAYNE BLVD, SUITE 500
NORTH MIAMI, FL 33181
SUBJECT: OFFICE FACILITIES
DATE: April 10, 2006

In accordance with the terms of your contract to sublease a space, you will have at the minimum 80 square feet of space available for your use. This space may at your option include the use of either of our two conference rooms or private office spaces. All terms and conditions of the contract apply to the use of this space.

Sincerely,



Ruth D. Vela
Manager