

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000023868

FILED  
Jan 11, 2005  
Secretary of State

Entity Name: MERCURY II, INC.

## Current Principal Place of Business:

401 E. LINTON BLVD  
APT 563  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

18 ST. THOMAS DRIVE  
PALM BEACH GARDENS, FL 33418 US

## Current Mailing Address:

C/O GOLDFARB, 401 E. LINTON BLVD  
APT 563  
DELRAY BEACH, FL 33483 US

## New Mailing Address:

C/O GOLDFARB, 18 ST. THOMAS DR  
PALM BEACH GARDENS, FL 33418 US

FEI Number: 65-0398205

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARALEGAL & ATTORNEY SERVICE BUREAU, INC.  
1406 HAYS ST., STE. 2  
TALLAHASSEE, FL 32312 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: PD ( ) Delete  
Name: GOLDFARB, HARRY E  
Address: 401 E. LINTON BLVD  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: VSD ( ) Delete  
Name: GOLDFARB, WILLIAM H.  
Address: 5 TWO MILE RD.  
City-St-Zip: FARMINGTON, CT 06032 US

Title: TD ( ) Delete  
Name: GOLDFARB, ROBERT B.  
Address: 5 TWO MILE ROAD  
City-St-Zip: FARMINGTON, CT 06032 US

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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: WILLIAM H. GOLDFARB

VSD

01/11/2005

Electronic Signature of Signing Officer or Director

Date