

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000030658

FILED
Apr 18, 2006
Secretary of State

Entity Name: MERITS HEALTH PRODUCTS, INC.

Current Principal Place of Business:

730 NE 19TH PLACE
N FORT MYERS, FL 33903 US

New Principal Place of Business:

730 NE 19TH PLACE
CAPE CORAL, FL 33909 US

Current Mailing Address:

C/O FRANCES SZYMANSKI
13391 GATEWAY DR #117
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0419976 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SZYMANSKI, FRANCES K
13391 GATEWAY DR #117
FORT MYERS, FL 33919 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: D () Delete
Name: CHENG, LARRY,
Address: 9 ROAD 36, TAICHUNG INDUSTRIAL PARK
City-St-Zip: TAICHUNG, TA

Title: D () Delete
Name: ANDERSON, WINSTON
Address: 20950 HUFFMASTER
City-St-Zip: N. FORT MYERS, FL

Title: DPST () Delete
Name: CHANG, TONY
Address: 9 RD 36 TRICAHUNG INDUSTRIAL PARK
City-St-Zip: TALCHUNG, TA,

Title: VP () Delete
Name: LEE, ANGELO
Address: 4235 PERTH CT
City-St-Zip: NORTH FORT MYERS, FL 33903

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: VP (X) Change () Addition
Name: LEE, ANGELO
Address: 4235 PERTH CT
City-St-Zip: NORTH FORT MYERS, FL 33903

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: LEE ANGELO

VP

04/18/2006

Electronic Signature of Signing Officer or Director

_____ Date