


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90196 006 ***150.00

DOCUMENT # P94000003991 1. Entity Name CARL J. MECKE, P.A.			
Principal Place of Business 1481 NW NORTH RIVER DR. MIAMI, FL 33125 US		Mailing Address PO BOX 814329 HOLLYWOOD, FL 33081 US	
2. Principal Place of Business 1468 NW 13TH TER Suite, Apt. #, etc.		3. Mailing Address 1123 BERRY CIR Suite, Apt. #, etc.	
City & State MIAMI, FL Zip 33125 Country US		City & State NORMAN, OK Zip 73072 Country US	
4. FEI Number 65-0462485		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MECKE, CARL J 1481 NW NORTH RIVER DR. MIAMI, FL 33125		7. Name and Address of New Registered Agent Name Sharon Thibault Street Address (P.O. Box Number is Not Acceptable) 5740 Hollywood Blvd # 300 City Hollywood FL Zip Code 33021	
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 Sharon Thibault		DATE 3-31-06	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD	NAME MECKE, CARL J	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 4311 BUCHANAN ST.	CITY-ST-ZIP HOLLYWOOD, FL 33021	TITLE 1123 BERRY CIR	
CITY-ST-ZIP HOLLYWOOD, FL 33021	NAME NORMAN, OK 73072		
TITLE MECKE, CARL J	STREET ADDRESS 1123 BERRY CIR	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP HOLLYWOOD, FL 33021	CITY-ST-ZIP NORMAN, OK 73072	TITLE MECKE, CARL J	
CITY-ST-ZIP HOLLYWOOD, FL 33021	NAME NORMAN, OK 73072		
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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: Carl J. Mecke		Date 4/25/06 Daytime Phone # 954 554 7659	