

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000083430 (5)

1. Corporation Name
MERFINANCE CORP.

Principal Place of Business
% J. ANTONIO BALTODANO
1001 SOUTH BAYSHORE DRIVE, SUITE 1804
MIAMI FL 33131

Mailing Address
% PENINSULA REGISTERED AGENTS, INC.
200 SOUTH BISCAYNE BLVD., SUITE 4874
MIAMI FL 33131

FILED
97 AUG 12 PM 2:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/31/1995		05/01/1996	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		65-0619900		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PENINSULA REGISTERED AGENTS, INC. 200 S. BISCAYNE BLVD. SUITE 4874 MIAMI FL 33131				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	CITY-ST-ZIP	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
TITLE	NAME	2.1 TITLE	2.2 NAME
STREET ADDRESS	CITY-ST-ZIP	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE	NAME	3.1 TITLE	3.2 NAME
STREET ADDRESS	CITY-ST-ZIP	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	CITY-ST-ZIP	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I do hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)

**PENINSULA
REGISTERED
AGENTS, INC.**

*Peninsula Registered Agents, Inc.
200 South Biscayne Boulevard
Miami, Florida 33131-2398
305.577.4733*

August 6, 1997

Ms. Amy Allen
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear Ms. Allen:

As discussed, the original annual report for this company was never received by us and was returned to the Division of Corporations. This was due to an error on the part of our post office at the beginning of the year, which caused all annual reports directed to Peninsula Registered Agents, Inc. to be returned to the Division of Corporations.

Accordingly, pursuant to your instructions, we are enclosing a duly completed annual report, together with Check No. 1464 in the amount of \$165.00 representing filing fees. You have agreed to waive the late penalty fee due to the circumstances mentioned above.

Thank you for your cooperation and assistance in this matter.

Yours sincerely,

PENINSULA REGISTERED AGENTS, INC.

By: 
Debra Kirschner, Vice President

/dek
(Encl.)