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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000095023**1. Corporation Name

NO MERCY, INC.

SIGNATURE:

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I are officer or director of the corporation or the receiver on trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appearable to Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

FILED Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90019 020 ***150.00



Principal Place	of Business	Mailing Address						
3301 N.W. 38TI		110 BLUE RAVINE ROAD			•			
MAMI FL 33054		SUITE 105 FOLSOM CA 95630 US			DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualifed			
		••			11/19/1996			
2 Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
2. Principal Place of Business		26	¬ · ·		65-0714795	No	ot Applicable	
Suite, Apt. #	# etc	Suite, Apt. #, etc.				\$8.75	Additional	
	., 200	27			5. Certifcate of Status Desired	Fee Re	equired	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
3		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Coun	itry	8. This corporation owes the current year	Intangible	_	
4	25	29	0		Personal Property Tax.	Yes	_ No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registere	d Agent		
	-			81 Name				
	ERS, DAVID J ESQ			82 Street Add	Street Address (P.O. Box Number is Not Acceptable)			
	AD AND CASSEL			Olioci Adi	A STATE OF THE PROPERTY OF THE PARTY OF THE		A 1 145 M 119 1 1 49	
	GLADES ROAD SUITE 300			83	· · · · · · · · · · · · · · · · · · ·			
BOC	A RATON FL 33434		F	84 City	1 (1967年) - 1977年) - 1977年) - 1978年)	* 85 Zip	Code	
			ľ	84 City	F		,	
11 Pursuant I	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the ab	ove-named cor	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	of changing its	registered -	
Childe of te				by and corporat				
agent. I ar	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	da Statu	tes.				
agent. I ar	n familiar with, and accept the obligat	tions of, Section 607.0505, Florid	da Statu	ies.	ired when reinstating) // DATE	·	·	
agent. I ar	n familiar with, and accept the obligat	it and title if applicable. (NOTE: F D DIRECTORS	da Statu	ies.	ired when reinstating) // DATE ADDITIONS/CHANGES TO OFFICERS.	AND DIRECTO		
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