

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000006955

FILED
Aug 10, 2005
Secretary of State

Entity Name: MERCEDES CONSULTING, INC.

Current Principal Place of Business:

194 SOUTH ISLAND DR.
GOLDEN BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

194 SOTH ISLAND DR.
GOLDEN BEACH, FL 33160

New Mailing Address:

194 SOUTH ISLAND DR.
GOLDEN BEACH, FL 33160

FEI Number: 65-0721316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHUSTACK, LAURIE
194 SOUTH ISLAND
GOLDEN BEACH, FL 33160 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: P () Delete
Name: WAX, IRWIN
Address: 194 SOUTH ISLAND DR,
City-St-Zip: GOLDEN BEACH, FL 33160

Title: VP () Delete
Name: SHUSTACK, LAURIE
Address: 194 SOTH ISLAND DR
City-St-Zip: MIAMI, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SHUSTACK, LAURIE
Address: 194 SOUTH ISLAND DRIVE
City-St-Zip: MIAMI, FL 33160

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: LAURIE SHUSTACK

V.P.

08/10/2005

Electronic Signature of Signing Officer or Director

Date