

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 10, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000039588**

1. Entity Name  
**MERKUR ENTERPRISES, INC.**



Principal Place of Business  
**1110 DEL PRADO BLVD SOUTH  
UNIT B  
CAPE CORAL, FL 33990 US**

Mailing Address  
**1110 DEL PRADO BLVD SOUTH  
UNIT B  
CAPE CORAL, FL 33990 US**



01072008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3454155**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**HOEFlich-WIEDERHOLD, IRENE M  
1110 DEL PRADO BLVD SOUTH  
UNIT B  
CAPE CORAL, FL 33990**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature typed or printed below registered agent and fee application

(NOTE: Registered Agent Signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
**PDST  
HOEFlich-WIEDERHOLD, IRENE M  
1110 DEL PRADO BLVD SOUTH, UNIT B  
CAPE CORAL, FL 33990**

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
**V.O  
WIEDERHOLD, RUDIGER  
1110 DEL PRADO BLVD SOUTH, UNIT B  
CAPE CORAL, FL 33990**

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
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TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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01/10/08-80024-017 150.00

**DO NOT WRITE  
IN THIS SPACE**

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

*Irene Hoeflich-Wiederhold*

01/07/08