

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 8:00 am
Secretary of State

07-10-2006 90028 032 ***150.00

DOCUMENT # P99000048194

1. Entity Name
MERSAN MAINTENANCE CORP.



Principal Place of Business Mailing Address

1164 SW 141 AVE. 1164 SW 141 AVE.
 MIAMI, FL 33184 MIAMI, FL 33184

50022069

2. Principal Place of Business 3. Mailing Address

1384 S.W. 143 AVE. **1384 S.W. 143 AVE.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

MIAMI, FL. **MIAMI, FL.**

Zip Country Zip Country

33184 **USA** **33184** **USA**



6. Name and Address of Current Registered Agent

WEIDER, NORMAN S
 100 SE 2ND ST., STE. 3950
 MIAMI, FL 33131

4. FEI Number Applied For

59-2294761 Not Applicable

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

7. Name and Address of New Registered Agent

Name **MERCEDES DE QUESADA**

Street Address (P.O. Box Number is Not Acceptable)

1384 S.W. 143 AVE.

City State Zip Code

MIAMI, FL. 33184 **FL** **33184**

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: **MERCEDES DE QUESADA** DATE: **7/5/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

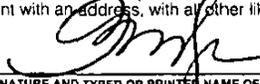
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	RIGAU, ANGELINA	
STREET ADDRESS	1164 S.W 141 AVE.	
CITY-ST-ZIP	MIAMI, FL 33184	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MERCEDES DE QUESADA	
STREET ADDRESS	1384 S.W. 143 AVE.	
CITY-ST-ZIP	MIAMI, FL 33184	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANUEL DE QUESADA	
STREET ADDRESS	1384 S.W. 143 AVE.	
CITY-ST-ZIP	MIAMI, FL 33184	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:  Date: **7/5/06** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR