


2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000092031**

1. Entity Name  
**MERLIN ASSOCIATES, INC.**



Principal Place of Business <b>C/O RICHARD DRATH 450 E. LAS OLAS BLVD. #950 FT LAUDERDALE, FL 33301</b>	Mailing Address <b>C/O RICHARD DRATH 450 E. LAS OLAS BLVD. #950 FT LAUDERDALE, FL 33301</b>
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04222004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0954953</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**DRATH, RICHARD  
450 E. LAS OLAS BLVD.  
950  
FT LAUDERDALE, FL 33301**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 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 - ST - ZIP	<b>MR DRATH, RICHARD 450 E. LAS OLAS BLVD. #950 FORT LAUDERDALE, FL 33301</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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UD00000130880  
04/26/04-80135-025 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied 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 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:** Richard Drath **4/23/04** **954-515-1040**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #