

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S25843** (1)

1. Corporation Name
MERY DESIGN, INC.



Principal Place of Business Mailing Address
5931 NW 5TH STREET MIAMI FL 33126

3. Date Incorporated or Qualified **01/17/1991** 3a. Date of Last Report **06/13/1995**
4. FEI Number **65-0241781** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 State, Apt. #, etc. 26 State, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~ERESPOX MANUEL & X
OCEAN BANK BLDG, SUITE 602X
780 NW LEJUNE RD X
MIAMI FL 33126 X~~

81 Name **Rene Palomino, Jr.**
82 Street Address (P.O. Box Number is Not Acceptable) **Best & Palomino P.A.**
83 **2665 South Bayshore Drive, #1206**
84 City **Coconut Grove** FL 85 Zip Code **33133**

11. Pursuant to the provisions of sections 607.0009 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and agree to the appointment, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*

Rene Palomino, Jr.

2/3/96
Date

12. OFFICERS AND DIRECTORS
D **SOMODEVILLA, MARILYN**
9621 SW 17TH STREET
MIAMI FL
SD
SOMODEVILLA, LUIS ORLANDO
9621 SW 17TH STREET
MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE Change Addition
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
9. TITLE Change Addition
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
13. TITLE Change Addition
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP
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55. STREET ADDRESS
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57. TITLE Change Addition
58. NAME
59. STREET ADDRESS
60. CITY, ST, ZIP
61. TITLE Change Addition
62. NAME
63. STREET ADDRESS
64. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information 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 am an officer or director of the corporation or the receiver or trustee or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an addition with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Marilyn Somodevilla

2/5/96 (305) 261-7253

CR2E034 (12/95)