


**ANNUAL REPORT**

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90481 003 \*\*\*150.00

**DOCUMENT # V65053**  
 1. Entity Name  
**ALBERTS & MERKEL BROS, INC. (1992)**



Principal Place of Business      Mailing Address  
**11580 HAGEN RANCH RD**      **11580 HAGEN RANCH RD**  
**BOYNTON BEACH, FL 33437**      **BOYNTON BEACH, FL 33437**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04202005      Chg-P      CR2E034 (10/03)

**6. Name and Address of Current Registered Agent**  
**MERKEL JEAN L**  
**11580 HAGEN RANCH RD**  
**BOYNTON BEACH, FL 33437**

**7. Name and Address of New Registered Agent**  
 Name: *Myrtha J. Banting*  
 Street Address (P.O. Box Number is Not Acceptable): *2414 S.W. 1st St.*  
 City: *Boynton Beach*      **FL**      Zip Code: *33435*

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: *Myrtha J. Banting*      DATE: *4-25-05*  
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**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	PT	<input checked="" type="checkbox"/> Delete
NAME	MERKEL, JEAN L	
STREET ADDRESS	11580 HAGEN RANCH ROAD	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437	
TITLE	VSD	<input checked="" type="checkbox"/> Delete
NAME	BANTING, MARTHA J	
STREET ADDRESS	2414 SW 1ST STREET	
CITY-ST-ZIP	BOYNTON BEACH, FL 33435	
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		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P, V, P, S, T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Banting, Martha J.	
STREET ADDRESS	2414 S.W. 1st	
CITY-ST-ZIP	Boynton Beach, FL 33435	
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 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: *Myrtha J. Banting*      Pres.      *4/22/05*