

2005 FOR PROFIT CORPORATION ANNUAL REPORT


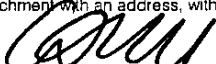
FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90389 030 ***150.00

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02102005 Chg-P CR2E034 (10/03)

DOCUMENT # S20558			
1. Entity Name MELFOR, INC.			
Principal Place of Business 1 NORTH CLEMATIS ST SUITE200 WEST PALM BEACH, FL 33401		Mailing Address 1 NORTH CLEMATIS ST SUITE200 WEST PALM BEACH, FL 33401	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0234539		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
TABERNILLA, ARMANDO A 1 NORTH CLEMANTIS ST SUITE200 WEST PALM BEACH, FL 33401		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS ROSS, DANIEL D ESQ 1 NORTH CLEMATIS ST WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CARSON, DONALD 1 NORTH CLEMATIS ST STE200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HERNANDEZ, OSCAR R 1 NORTH CLEMATIS ST STE200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS TABERNILLA, ARMANDO A 1 NORTH CLEMATIS STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT BLOMQUIST, ERIK J 1 NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FERNANDEZ, LUIS J 1 NORTH CLEMATIS ST STE 200 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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: 		Armando A. Tabernilla, VP 2/15/05 561-655-6303	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

(CONTINUED)

ATTACHMENT

40062058

ATTACHMENT TO
2005 ANNUAL REPORT

DOCUMENT # S20558

1. Corporation Name

MELFOR, INC.

11. - CONTINUED

ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ryan, IV, Allan A.	
STREET ADDRESS	One North Clematis St., Suite 200	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE	V/AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tarr, William F., Esq.	
STREET ADDRESS	One North Clematis St., Suite 200	
CITY-ST-ZIP	West Palm Beach, FL 33401	