

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 211967

Entity Name: MELBA, INC.**Current Principal Place of Business:**5385 PALM AVE.
SUITE 1
HIALEAH, FL 33012**Current Mailing Address:**PO BOX 22546
HIALEAH, FL 33002-2546 US**FEI Number:** 59-0862065**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KURZWEIL, ALAN
5385 PALM AVE.
APT. 1
HIALEAH, FL 33012 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	KURZWEIL,ALAN
Address	9591 SW 124 TERRACE
City-State-Zip:	MIAMI FL 33176

Title	VPSD
Name	KURZWEIL, JODI LYNN
Address	2000 ISLAND BLVD. #2603
City-State-Zip:	AVENTURA FL 33160

Title	TD
Name	OROVITZ, ESTA K
Address	14020 SW 104TH PLACE
City-State-Zip:	MIAMI FL

Title	AS
Name	LOZANO, BARBARA
Address	10471 NW 130 STREET
City-State-Zip:	HIALEAH GARDENS FL 33018

Title	VP
Name	KURZWEIL, ROSE
Address	9591 SW 124 TERR.
City-State-Zip:	MIAMI FL 33176

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ALAN KURZWEIL**PRESIDENT****01/21/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date