

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90293 008 \*\*\*150.00

**DOCUMENT # 211967**

1. Entity Name

MELBA, INC.



Principal Place of Business

5385 PALM AVE.  
P.O. BOX 2546 PALM VILLAGE STATION  
HIALEAH FLA 33012

Mailing Address

PO BOX 22546  
HIALEAH FL 33002-2546  
US

49027040



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-0862065

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KURZWEIL, ALAN  
8641 SW 84 TERR  
MIAMI FL 33143

7. Name and Address of New Registered Agent

Name

Kurzweil, Alan

Street Address (P.O. Box Number is Not Acceptable)

9591 SW 124 Terrace

City

Miami

FL

Zip Code  
33176

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

Signature, typed or printed name of registered agent and title if applicable.

Alan Kurzweil

04-09-04

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME KURZWEIL, ALAN  
STREET ADDRESS 8641 SW 84 TERR  
CITY-ST-ZIP MIAMI FL

TITLE VS ☐ Delete  
NAME KURZWEIL JODI  
STREET ADDRESS 555 NE 34TH ST., #2408  
CITY-ST-ZIP MIAMI FL 33137

TITLE TD ☐ Delete  
NAME OROVITZ, ESTA-K  
STREET ADDRESS 14020 SW 104TH PLACE  
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME Kurzweil, Alan  
STREET ADDRESS 9591 SW 124 Terrace  
CITY-ST-ZIP Miami, FL 33176

TITLE VPSD ☒ Change ☐ Addition  
NAME Kurzweil, Jodi Lynn  
STREET ADDRESS 2000 Island Blvd. #2603  
CITY-ST-ZIP Aventura, FL 33160

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AS ☐ Change ☒ Addition  
NAME Lozano, Barbara  
STREET ADDRESS 10471 NW 130 Street  
CITY-ST-ZIP Hialeah Gardens, FL 33018

TITLE VP ☒ Change ☒ Addition  
NAME Kurzweil, Rose  
STREET ADDRESS 9591 SW 124 Terr.  
CITY-ST-ZIP Miami, FL 33176

TITLE ☐ Change ☐ 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alan Kurzweil

04-09-04 305-822-9555

Date

Daytime Phone #