

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 211967

Entity Name: MELBA, INC.

FILED  
Jan 11, 2007  
Secretary of State

## Current Principal Place of Business:

5385 PALM AVE.  
SUITE 1  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 22546  
HIALEAH, FL 330022546 US

## New Mailing Address:

FEI Number: 59-0862065

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KURZWEIL, ALAN  
9591 SW 124 TERRACE  
MIAMI, FL 33176 US

## Name and Address of New 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: ALAN KURZWEIL

01/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KURZWEIL, ALAN,  
Address: 9591 SW 124 TERRACE  
City-St-Zip: MIAMI, FL 33176

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

Title: TD ( ) Delete  
Name: OROVITZ, ESTA K  
Address: 14020 SW 104TH PLACE  
City-St-Zip: MIAMI, FL

Title: AS ( ) Delete  
Name: LOZANO, BARBARA  
Address: 10471 NW 130 STREET  
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: VP ( ) Delete  
Name: KURZWEIL, ROSE  
Address: 9591 SW 124 TERR.  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALAN KURZWEIL

PD

01/11/2007

Electronic Signature of Signing Officer or Director

Date