## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 330696

1. Corporation Name

MELVIN TOOL & DIE, INC.

## **FILED** Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90027 010 \*\*\*150.00



Principal Place of Business Mailing Address								
4053 N E 5TH		4053 N E 5TH TERRACE						
FT LAUDERDALE FL 33334		FT LAUDERDALE FL 33334		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed	<u> </u>		
					05/29/1968		Ì	
2. Principal Pl	ace of Business	2a, Mailing Address		4. FEI Number	Apr	plied For		
21		26			59-1212991	Not	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 A	dditional		
22		27		5. Certifcate of Status Desired	Fee Rec	quired		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be		
		28		Trust Fund Contribution	Added to	Fees		
Zip	Country	Zip	Count	ry	8. This corporation owes the current year		_	
24	25	29 30			Personal Property Tax.		□No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	ed Agent		
LADO	CHE IMPO C		8	1 Name	·	,		
	CHE, JAMES G.		8	2 Street Addr	ress (P.O. Box Number is Not Acceptable)			
	EAST SUNRISE BLVD.							
FUR	T LAUDERDALE FL 33304		8	3			j	
			8	4 City		85 Zip C	ode	
				•	-			
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	orized b	v the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	e of changing its i opointment as reg	gistered	
SIGNATURE							., ,	
- CICITATIONE	Signature, typed or printed name of registered ager			ent signature require				ć
12		ID DIRECTORS	13.	<del></del> -	ADDITIONS/CHANGES TO OFFICERS		RS IN 12 Addition	7
₹ITLE	VD	☐ DELETE	1.1 TITLE	1		☐ Change	L_J Addition [	2
NAME	KING, STANLEY F.		1.2 NAMI	E			}	2
STREET ADDRESS	4053 N.E. 5TH TERRACE		1.3 STRE	ET ADDRESS				Ù
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY			Change	Addition	ç
TITLE	PD	☐ DELETE	2.1 TITLE	ſ		Change	[ Addition	`
NAME	KING,RUSSELL G		2.2 NAM	·				
STREET ADDRESS	4053 N.E. 5TH TERRACE	İ	2.3 STRE	ET ADDRESS	•			1
CITY-ST-ZIP	FORT LAUDERDALE FL		2.4 CITY	-ST-ZIP				
TITLE	SD	☐ DELETE	3.1 TITLE	•	: •	Change	☐ Addition	
NAME	KING, JUDITH A		3.2 NAMI	E	- •			-
STREET ADDRESS			3.3 STRE	ET ADDRESS			- {	
CITY-ST-ZIP	FORT LAUDERDALE FL		3.4. CITY	-ST-ZIP			——————————————————————————————————————	
TITLE		☐ DELETE	4.1 TITLE	•		☐ Change	☐ Addition	
NAME		(	4. 2 NAM	E				
STREET ADDRESS			43 STRE	ET ADDRESS			,	
CITY-ST-ZIP			4.4 CITY	-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE	<b>I</b>	•	☐ Change	☐ Addition	ı
NAME			5.2 NAMI			* •		
STREET ADDRESS			5.3 STRE	ET ADORESS				
CITY-ST-ZIP			5.4 CITY				<del></del>	ĺ
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition	i
NAME			6.2 NAM	E				i
STREET ADDRESS			6.3 STRE	ET ADDRESS				i
CITY-ST-ZIP			6.4 CITY	-ST-ZIP				ı

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

KING , VP