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FILED
Jan 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 333017 (2)
1. Corporation Name
JON MELERIC INC.



Principal Place of Business
300 E. CAUSEWAY RD.
INDIAN HARBOUR BEACH FL 32937

Mailing Address
36 MARINA ISLAND BLVD.
INDIAN HARBOUR BEACH FL 32937

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 300 E Causeway Rd.
Suite, Apt. #, etc.
22 IN. Hrbr. Bch.
City & State
23 FL
Zip 24 32937 Country 25 USA
2a. Mailing Address
26 36 Marina Isle Blvd.
Suite, Apt. #, etc.
27 IN. Hrbr. Bch.
City & State
28 FL
Zip 29 32937 Country 30 USA

3. Date Incorporated or Qualified
07/26/1968
4. FEI Number 59-1270397 ☒ Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☒ No

9. Name and Address of Current Registered Agent

MELYNNE K. CHIARIELLO
36 MARINA ISLES BLVD.
SUITE 206
INDIAN HARBOUR BEACH FL 32937

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Melynne K. Chiariello
Signature, typed or printed name of registered agent and title if applicable (NOTE - Registered Agent signature required when reinstating)

1-8-98
DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
	PD			
	CHIARIELLO, JOHN	36 MARINA ISLE BLVD.	INDIAN HARBOUR BEACH FL 32937	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP

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.

SIGNATURE John Chiariello

1-8-98 1-1102-222 2352

CR2E034 (10/97)