

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 06, 2005 08:00 AM
Secretary of State

DOCUMENT # 602572

1. Entity Name
MELVIN AND MELVIN, P.A.



Principal Place of Business
3101 N. FEDERAL HIGHWAY
STE 602
FORT LAUDERDALE, FL 33306 US

Mailing Address
3101 N. FEDERAL HIGHWAY
STE 602
FORT LAUDERDALE, FL 33306 US

DO NOT WRITE IN THIS SPACE



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1308933

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MICHAEL W MELVIN
3101 N. FEDERAL HIGHWAY
STE 602
FT LAUDERDALE, FL 33306

**DO NOT WRITE
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PS
NAME MELVIN, MICHAEL W
STREET ADDRESS 3101 N. FEDERAL HIGHWAY, STE 602
CITY-ST-ZIP FT LAUDERDALE, FL 00000,

TITLE DT
NAME MELVIN, MICHAEL W
STREET ADDRESS 3101 N. FEDERAL HIGHWAY, STE 602
CITY-ST-ZIP FT LAUDERDALE, FL 00000,

TITLE ST
NAME MELVIN, MICHAEL W
STREET ADDRESS 3101 N. FEDERAL HIGHWAY, STE 602
CITY-ST-ZIP FORT LAUDERDALE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000172718
01/06/05-80011-005 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 fee empowered.

SIGNATURE:

BY:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL W. MELVIN, as President

and not individually

1/4/05

Date

954-565-9513

Daytime Phone #