

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 640548

FILED  
Jan 27, 2004  
Secretary of State

Entity Name: MELEX CUSTOMHOUSE BROKERS, INC.

**Current Principal Place of Business:**

2005 NW 70 AVENUE  
MIAMI, FL 33122 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 524305  
PO BOX 524305  
MIAMI, FL 33152 US

**New Mailing Address:**

FEI Number: 59-1944388      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LUCIO, LUIS J  
15614 SW 50 TERR  
MIAMI, FL 33185 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LUCIO, LUIS J  
Address: 15614 SW 50 TERR  
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete  
Name: MARTIN, MICHAEL R  
Address: 10801 N.W. 22 STREET  
City-St-Zip: PEMBROKE PINES, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 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: LUIS J LUCIO

PD

01/27/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date