

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008 08:00 AM
Secretary of State

DOCUMENT # 642494 1. Entity Name MELANDO, INC.	
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Principal Place of Business 1833 TYLER STREET HOLLYWOOD, FL 33020	Mailing Address 1833 TYLER STREET HOLLYWOOD, FL 33020
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DO NOT WRITE IN THIS SPACE



05142008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1699534	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DOMONICO DELUCCA 1833 TYLER STREET HOLLYWOOD, FL 33020	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

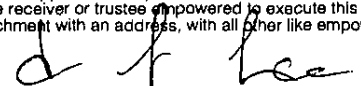
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DELUCA, DOMENICO 4931 VAN BUREN ST. HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

000000951925
06/04/08-80056-019 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #