2006 FOR PROFIT CORPORATION ANNUAL REPORT

| DOCUMENT # 661031 1. Entity Name MELODI ENTERPRISES INC. Principal Place of Business Mailing Address | | | | FILED 06 JUL 31 AMII: 52 | | |
|--|---|-----------------------------------|--|---|-----------|--|
| 3061 SW 10 MIAMI, FL 3 | 9 CT | 3061 SW 109 CT MIAMI, FL 33165 | | I 18845 SIII | TALLAHASS | Y OF STATE SEE, FLORIDA |
| DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent | | | | 02 06 /64 90076 012 \$155.00 07112006 No Chg.P CR2E034 (11/05) 4. FEI Number 59-2000088 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required | | |
| DIAZ, LUIS 3061 WS 1 MIAMI, FL | S O. 109 CT | DO NOT WRITE IN THIS SPACE | | | | |
| 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tam familiar with, and accept the obligations of registered agent. SIGNATURE Signature. Nyped or present pagent and title if applicable. (NOTE: Registered Agent signature required when renstating) DATE | | | | | | |
| FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006 9. Election Campaign Financi Trust Fund Contribution. | | | | .00 May Be led to Fees | | s. 607.193(2)(b), F.S., the receive the prior notice. |
| 10. ITTLE NAME STREET ADORESS CITY-SI-ZIP TITLE NAME STREET ADORESS CITY-SI-ZIP | OFFICERS AND DIR SD DIAZ, MARIA E 3061 SW 109 CT MIAMI, FL 00000, PD DIAZ, LUIS O 3061 SW 109 CT MIAMI, FL 00000, | ECTORS | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS | | 198/3 | | DO NOT WRITE IN THIS SPACE | | |
| CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP | - | | | | - • | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| 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 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 Date Daylorne Prione # | | | | | | |

Division of Corporations

To Whom It May Concern: Document# 661031

My name is Luis O Diaz and I am writing this to clear up a misunderstanding. I mailed the annual report with a check of \$150.00 for Melodi Enterprises, INC on January 24, 2006. The department of state cashed the check on February 6 2006. I never received any other notice until I received the Notice of Intent to Dissolve. I am sending you the form again but without the check. If you can please waive the late fee because I did not know there was a problem with the form. Thank you

Luis O Diaz Melodi Enterprises INC