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Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 671837 (3)
1. Corporation Name
MELLIN INDUSTRIES, INC.

Principal Place of Business
3496 NE 12 TERR
FT LAUDERDALE FL 33334

Mailing Address
3496 NE 12 TERR
FT LAUDERDALE FL 33334-4565



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/30/1980		3a. Date of Last Report 05/01/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-2047273		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent HEDGES, RHEY W 3496 N.E. 12TH TERR. FT LAUDERDALE FL 33334				10. Name and Address of New Registered Agent			
				81 Name RICHARD H. MCGARGAR			
				82 Street Address (P.O. Box Number is Not Acceptable) 806 WEST KALMIA DRIVE			
				83			
				84 City Lake Park			
				FL 85 Zip Code 33403			

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 *Richard H. McGargar* RICHARD H. MCGARGAR - President 4/17/97
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE VD	DELETE	1.1 TITLE President, Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME HEDGES, RHEY W.		1.2 NAME RICHARD H. MCGARGAR	
STREET ADDRESS 1571 N.E. 47TH ST.		1.3 STREET ADDRESS 806 WEST KALMIA DRIVE	
CITY-ST-ZIP FT. LAUDERDALE FL		1.4 CITY-ST-ZIP LAKE PARK, FL 33403	
TITLE SD	DELETE	2.1 TITLE Kenneth Sibrava	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SIBRAVA, KENNETH E	OK	2.2 NAME Director only	
STREET ADDRESS 28226 GATES MILLS BLVD.		2.3 STREET ADDRESS	
CITY-ST-ZIP PEPPER PIKE OH		2.4 CITY-ST-ZIP	
TITLE PTD	DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ERDMAN, HAROLD		3.2 NAME	
STREET ADDRESS 2 RIBBON CANDY LANE		3.3 STREET ADDRESS	
CITY-ST-ZIP TROY NY		3.4 CITY-ST-ZIP	
TITLE D	DELETE	4.1 TITLE V.P., SecR, Treas, Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ACHILLES, DON		4.2 NAME DONALD ACHILLES	
STREET ADDRESS 260 N.E. 38TH ST., #2		4.3 STREET ADDRESS 148 NE 38 Street #44	
CITY-ST-ZIP FT. LAUDERDALE FL		4.4 CITY-ST-ZIP OAKLAND PARK, FL 33334	
TITLE	DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: *Richard H. McGargar* RICHARD MCGARGAR 4/17/97 954-566-6551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)