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FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/30/1980

4. FEI Number
59-2047273

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business
21 700 OLD DIXIE HWY

Suite, Apt. #, etc.
22 SUITE 206

City & State
23 LAKE PARK, FL.

Zip
24 33403

Country
25 USA

2a. Mailing Address
26 700 OLD DIXIE HWY.

Suite, Apt. #, etc.
27 SUITE 206

City & State
28 LAKE PARK, FL.

Zip
29 33403

Country
30 USA

9. Name and Address of Current Registered Agent

MCCARGAR, RICHARD A
806 WEST KALMIA DR
LAKE PARK FL 33403

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
MCCARGAR, RICHARD H.
806 WEST KALMIA DR
LAKE PARK FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SIBRAVA, KENNETH
28226 GATES MILLS BLVD.
PEPPER PIKE OH ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
ERDMAN, HAROLD
2 RIBBON CANDY LANE
TROY NY ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPSD
ACHILLES, DON
148 NE 38 ST #44
OAKLAND PARK FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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

CR2E034 (10/97)