PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300003767 1. Corporation Name

MELITO & ADOLFSEN P.C.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90109 046 ***150.00



A A CONTRACTOR OF THE CONTRACT						
Principal Place of Business Mailing Address						
233 BROADWAY NEW YORK NY 10279-0118		233 BROADWAY NEW YORK NY 10279-0118			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
					08/16/1993	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			13-2668916 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
		27			Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23		28	Country	_		
Zip Country		— <u> </u>	¬ ¯ ˙		8. This corporation owes the current year Intangible Personal Property Tax.	
24 2 25 29 29 9. Name and Address of Current Registered Agent				_	10. Name and Address of New Registered Agent	
	5. Name and Address of Current	r Kegisteren Agent	81	Name		
FISCHER, BRADLEY S						
110 SOUTHEAST SIXTH ST.			82	82 Street Address (P.O. Box Number is Not Acceptable)		
	E'1280		83			
	AUDERDALE FL 33301				Total 72- Octo	
,	3 73.74		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.		ID DIRECTORS	13.	, organization to	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVPS		1.1 TITLE		DVP Change Addition	
NAME	ADOLFSEN, LOUIS G	I	1.2 NAME	Ì	ADAMS, STEVEN G	
STREET ADDRESS	233 BROADWAY		1.3 STREET	TADORESS	s 233 BROADWAY	
CITY-ST-ZIP	NEW YORK NY 10279		1.4 CITY-S	τ-ZIP	NEW YORK NY 10279	
TITLE	DP	☐ DELETE	2.1 TITLE		DVP Change Addition	
NAME	MELITO, IGNATIUS J	<u> </u>	2.2 NAME		SAMBURSKY, NEIL L	
STREET ADDRESS	1		2.3 STREE	T ADDRESS		
CITY-ST-ZIP			2.4 CITY-5	ST-ZIP	NEW YORK NY 10279	
TITLE			3.1 TITLE	T	☐ Change ☐ Addition	
NAME	SOMOZA, JOHN H. 32N		3.2 NAME	\		
STREET ADDRESS			3.3 STREE	TADDRESS	\$	
CITY-ST-ZIP.	NEW YORK NY		3.4. CITY-5	ST-ZIP		
TITLE	DVP	☐ DELETE	4.1 TITLE)	Change Addition	
NAME	POLLACK, DAVID M.		4. 2 NAME			
STREET ADDRESS	233 BROADWAY		4.3 STREE	TADDRESS	3	
CITY-ST-ZIP	NEW YORK NY		4.4 CITY-S	T-ZIP		
TITLE	DVP	-	5.1 TITLE		☐ Change ☐ Addition	
NAME	WALSH, ROBERT F.		5.2 NAME			
STREET ADDRESS	233 BROADWAY			TADDRESS	i	
CITY-ST-ZIP	NEW YORK NY		5.4 CITY-S	T-ZIP	☐ Change ☐ Addition	
TITLE	DVP		6.1 TITLE	}	☐ Change ☐ Addition	
NAME	SEPHENS, S. DWIGHT		6.2 NAME	TANDECCE		
STREET ADDRESS	233 BROADWAY		6.3 STREE	T ADDRESS	1	

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 bustee 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, with all other like empowered.

SIGNATURE:

SIGNATURE DEQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR