

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F94000002496

Entity Name: MEL-RAY INDUSTRIES, INC.

FILED
Oct 10, 2005
Secretary of State

Current Principal Place of Business:

134 LAKE ST
POMONA PARK, FL 32181 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1014
POMONA PARK, FL 32181 US

New Mailing Address:

FEI Number: 58-1826725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINGLETON, RAYMOND
134 LAKE ST
POMONA PARK, FL 32181 US

Name and Address of New Registered Agent:

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.

SIGNATURE: RAYMOND SINGLETON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPT () Delete
Name: SINGLETON, RAYMOND
Address: PO BOX 1014
City-St-Zip: POMONA PARK, FL 32181

Title: VCVS () Delete
Name: SINGLETON, MELISSA
Address: PO BOX 1014
City-St-Zip: POMONA PARK, FL 32181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAYMOND SINGLETON

CPT

10/10/2005

Electronic Signature of Signing Officer or Director

Date