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Secretary of State

04-01-1999 90011 047 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F98000001993

1. Corporation Name
 MELNICK VENTURES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 200 L'AMBIANCE CIRCLE, #105 NAPLES FL 34108
 Mailing Address: 200 L'AMBIANCE CIRCLE, #105 NAPLES FL 34108

3. Date Incorporated or Qualified: 04/07/1998
 4. FEI Number: TAX ID # APPLIED FOR 52-208-4546
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: 21 262 MONTEREY DR, 22 Suite, Apt. #, etc.
 23 NAPLES, FL, 24 Zip 34119, 25 Country USA
 2a. Mailing Address: 26 262 MONTEREY DR, 27 Suite, Apt. #, etc.
 28 NAPLES, FL, 29 Zip 34119, 30 Country USA

9. Name and Address of Current Registered Agent
 MELNICK, STUART L
 200 L'AMBIANCE CIRCLE, #105
 NAPLES FL 34108

10. Name and Address of New Registered Agent
 81 Name: SAME
 82 Street Address (P.O. Box Number is Not Acceptable): 262 MONTEREY DR
 83
 84 City: NAPLES, FL, 85 Zip Code: 34119

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] DATE: 1/5/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PSTD	<input type="checkbox"/> DELETE	1.1 TITLE: PRESIDENT PTSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: MELNICK, STUART L		1.2 NAME: MELNICK, STUART L	
STREET ADDRESS: 200 L'AMBIANCE CIRCLE, #105		1.3 STREET ADDRESS: 262 MONTEREY DR	
CITY-ST-ZIP: NAPLES, FL 34108		1.4 CITY-ST-ZIP: NAPLES, FL 34119	
TITLE:	<input type="checkbox"/> DELETE	2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		2.2 NAME:	
STREET ADDRESS:		2.3 STREET ADDRESS:	
CITY-ST-ZIP:		2.4 CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> DELETE	3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		3.2 NAME:	
STREET ADDRESS:		3.3 STREET ADDRESS:	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> 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:	<input type="checkbox"/> 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 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, with all other like empowered.

SIGNATURE: [Signature] DATE: 1/5/99
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: [Signature] DATE: 1/5/99
 Daytime Phone #: 941-354-0256

CORP 11/99