


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 08:00 AM
Secretary of State

DOCUMENT # G68688
 1. Entity Name
 MELIDONI, INC.



Principal Place of Business: 1202 E., HILLSBORO, BLVD, DEERFIELD, BCH., FL 33441
 Mailing Address: 1202 E., HILLSBORO, BLVD, DEERFIELD, BCH., FL 33441

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02282007 No Chg-P CR2E034 (11/05)

4. FEI Number: 59-2434354
 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent
 DOTRO, JOSEPH
 1202 E. HILLSBORO BLVD
 DEERFIEL BCH, FL 33441

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-appointing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

UN0000654262
 03/13/07-80055-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DOTRO, ROSEMARIE
STREET ADDRESS	1202 EAST HILLSBORO BLVD
CITY-ST-ZIP	DEERFIELD BEACH, FL
TITLE	PVD
NAME	DOTRO, JOSEPH
STREET ADDRESS	1202 EAST HILLSBORO BLVD
CITY-ST-ZIP	DEERFIELD BCH., FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 3/2/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR