FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K24296

(1)

Mailing Address

MELSTINE CORPORATION

Principal Place of Business

FILED	
May 02 1997 8:00ar	n
Secretary of State	

8550 BISCAYNE BLVD 8TE 601		3550 BISCAYNE BLVD STE 601							
MIA I FL 33137 US	7		MIA 1 FL 33137-3856 US			3. Date Incorporated or Qualified 05/20/1988	3a. Date of Last Report 09/11/1996		
2. Principal P	lace of Busin	ness	2a. Mailing Address			4. FEI Number	Applied For		
21			26			59-2192188	Not Applicable		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				¢9.75		
22			27			5. Certificate of Status Desired	Fee Required		
City & State	9		City & State			6. Election Campaign Financing	\$5.00 May Be		
23			28			Trust Fund Contribution	Added to Fees		
Zip		Country	Zip	Count	ry	8. This corporation has liability for in	ntangible tax under s. 199.032.		
24		25	29	30			Yes No		
	g, Name	and Address of Curre	ent Registered Agent			10. Name and Address of New Reg	jistered Agent		
PRK	CE, IRA B			8	1 Name				
		AND BLVD.		ā	Caront And	drang (D.O. Doublimbor in Mat Appendia			
		, SUITE 1701		٥	Z Street Ad	dress (P.O. Box Number is Not Acceptab	e, .		
	MI FL 3315			8	3				
III W		•							
				8	4 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 little if applicable (NOTE Registered Agent signature required when reinstating) DATE									
12.			ND DIRECTORS	18.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12		
TITLE	PSDT		DELETE	1.1 1/10			Change Addition		
NAME	LAW, IAN	1		1.2 NAM	E		.		
STREET ADDRESS		CAYNE BLVD., SUIT	E 601		ET ADDRESS				
CITY-ST-ZIP	MIAMI FL			1.4 CHTY	į				
TITLE			DELETE	21 1111			Change Addition		
NAME				2.2 NAM			Second Co. Second Co.		
STREET ADDRESS					ET ADDRESS		·		
						0.5			
CITY-ST-ZIP TITLE	 		DELETE	3.1 TITU	- S1 - ZIP		Change Addition		
NAME				3.2 NAM			C Outside C Manual		
]								
STREET ADDRESS	j				ET ADDRESS				
CITY-ST-ZIP			DELETE		- \$1 - ZIP		Change Addition		
TITLE	1		L.J DELETE	4.1.1(1(1			Change C Addition		
NAME				4. 2 NAM	i				
STREET ADDRESS	1				E1 ADDRESS				
CITY-ST-ZIP			D be ere		- \$1 - 2IP		Toleran Table		
TITLE			☐ DELETE	5.4 ¥11L0	1		Change Addition		
NAME				5.⊉ NAM	€				
STREET ADDRESS				5.8 STR	E1 ADDRESS		ļ		
CITY-ST-ZIP		····		5.4 CITY					
TITLE			☐ DELETE	6.4 TITLE			Change Addition		
NAME				6.₽ NAM	E		j		
STREET ADDRESS				6.\$ STR	ET ADDRESS				
CITY-ST-ZIP				6.4 CITY	- \$1 - ZIP				
14. do herel	by certify tha	It the information supplies	ed with this filing does not qual	ify for the e	kemption stat	ed in Section 119.07(3)(i), Florida Statule	s. 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 phynogod, or on an attachment with an address.									