2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 26, 2007 08:00 AM Secretary of State

DOCL	INVEN	JT £	ŧΝ	በበበበ	ነበበ	ነበበ.	49NN
レスノしょし	JIVILI	VI t	- , ,	\mathbf{v}	,,,,	JUU.	TJUU

1. Entity Name

OLGA AND DAVID MELIN FOUNDATION, INC.



Principal Place of Business

1800 NE 114TH ST, #1709 MIAMI, FL 33181 Mailing Address

1800 NE 114TH STREET SUITE 1709 MIAMI, FL 33181



02212007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-1036928	Applied For Not Applicable	<u> </u>
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BERK, ARTHUR J ESQ 848 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

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 accepted the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE Filling Fee is \$61.25 B. Election Campaign Financing Added to Fees Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS			•		
Filling Fee is \$61.25 Due by May 1, 2007 Signalure, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) PATE 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			of changing its registered office or	registered agent, or both	, in the State of Florida I am familiar with, and accept
Filing Fee is \$61.25 Due by May 1, 2007 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		evoed or printed name of registered agent and title if applications	le (NOTE; Registered Agent signate	re required when reinstaling)	DATE
10. OFFICERS AND DIRECTORS	Filing F	Fee is \$61.25	Election Campaign Financing	\$5.00 May Be	
	0.	OFFICERS AND DIRECTORS			
TITLE D NAME MELIN, OLGA STREET ADDRESS 1800 NE 114TH ST, #1709 CITY-ST-7IP MIAMI, FL 33181 LIDOCIDE TO TO TO THE PROPERTY OF THE PROPERTY	AME · MELIN, TREET ADDRESS 1800 NE	NE 114TH ST, #1709			, , ,
TITLE D 100000735210 05/10/07-80024-019 61 STREET ADDRESS 1800 NE 114TH ST, #1709 CITY-ST-ZIP MIAMI, FL 33181	AME MELIN, TREET ADDRESS 1800 NE	NE 114TH ST, #1709		·	05/10/07-80024-019 61.2
TITLE D NAME MELIN, GINA STREET ADDRESS CITY-ST-2IP MIAMI, FL 33181 DO NOT WRITE	AME MELIN, TREET ADDRESS 1800 NE	NE 114TH ST, #1709		DO	NOT WRITE
TITHE NAME STREET ADDRESS CITY-ST-ZIP	AME TREET ADDRESS			IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ame Treet address				
TITLE MAME STREET ADDRESS CITY-ST-ZIP 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	ame Treet address (TY-ST-ZIP	at the information supplied with this files, do	es pet qualifu for the exemptions of	ontained in Chapter 119	Florida Statutes I further certify that the information

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 617, 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:

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

Hoya X land