

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90010 037 ****61.25

DOCUMENT # N07014

1. Entity Name

MELROSE MERCHANT ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3259 NW 28 ST
MIAMI FL 33142

3259 NW 28 ST
MIAMI FL 33142

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0696022

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARRIOS, RAYMUNDO
3259 NW 28 ST
MIAMI FL 33142

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME BARRIOS, RAYMUNDO ☐ Delete
STREET ADDRESS 3259 NW 28TH ST
CITY-ST-ZIP MIAMI FL 33142

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME LANG, BERNARDINO ☐ Delete
STREET ADDRESS 2257 E 10TH AVENUE
CITY-ST-ZIP HIALEAH FL 33013

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME RUIZ DEL VISO, ORLANDO ☒ Delete
STREET ADDRESS 3365 NW 32 ST
CITY-ST-ZIP MIAMI FL 33142

TITLE S MARIA R. Almeyda ☒ Change ☐ Addition
NAME 591 E. 30 ST.
STREET ADDRESS HIALEAH FL 33013
CITY-ST-ZIP

TITLE D
NAME RIESGO, ORLANDO SR ☒ Delete
STREET ADDRESS 3251 NW GWEN DR
CITY-ST-ZIP MIAMI FL 33142

TITLE D MISAE MARTINEZ ☒ Change ☐ Addition
NAME 16681 West 11 CT.
STREET ADDRESS HIALEAH FL 33012
CITY-ST-ZIP

TITLE D
NAME AVILA, ELIO ☐ Delete
STREET ADDRESS 3251 N.W. 28 ST.
CITY-ST-ZIP MIAMI FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME CABRERA, JOSE ☐ Delete
STREET ADDRESS 3054 NW 83 TERR
CITY-ST-ZIP MIAMI FL 33142

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/24/04 - 305-637-8850