2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000065794

1. Entity Name
MELCO UNLIMITED, INC.

Principal Place of Business	Mailing Address
3520 SOUTH STREET TITUSVILLE, FL 32780	3520 SOUTH STREET TITUSVILLE, FL 32780

DO NOT WRITE IN THIS SPACE

07232004 No Chg P CR2E034 (10/03)

4. FEI Number
59 3320930

Applied For
Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLIN, ROBERT
2724 HILLCREST AVENUE
TITUSVILLE, FL 32796

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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: _____
Signature, typed or printed name of registered agent and title if applicable (If new Registered Agent signature required when reinstated) DATE

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	COLIN, JUDY
STREET ADDRESS	2724 HILLCREST AVENUE
CITY-ST-ZIP	TITUSVILLE, FL 32796
TITLE	D
NAME	COLIN, ROBERT
STREET ADDRESS	2724 HILLCREST AVENUE
CITY-ST-ZIP	TITUSVILLE, FL 32796
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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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 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 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: R. L. Colin 7/23/04 321-268-1313
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL FILING ON DIRECTOR Date Daytime Phone #