

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P01000096471

1. Corporation Name

MELMON INVESTMENTS CORP.

Principal Place of Business

2902 NW 27TH AVENUE
MIAMI FL 33142

Mailing Address

2902 NW 27TH AVENUE
MIAMI FL 33142

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/03/2001

5. FEI Number

01-0663682

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PTD	MELERO, ANTONIO	2902 NW 27TH AVENUE	MIAMI FL 33142
D	MONREAL, RAFAEL	2902 NW 27TH AVENUE	MIAMI FL 33142
PT	Melero, Antonio	2902 NW 27th Avenue	Miami FL 33142
VD	MonREAL, Rafael	2902 NW 27th Avenue	Miami FL 33142

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11/04/02--01107--010 **150.00

8. Name and Address of Current Registered Agent

MELERO, ANTONIO
2902 NW 27TH AVENUE
MIAMI FL 33142

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10-31-2002

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED
Rafael Monreal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

229

10-31-2002 (305) 887-4027 Ex 1

CR2E040 (8/02)

MELMON Investments Corporation

October 31st, 2002

Division of Corporations
Annual Report / Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327

Document #: P01000096471

Corporation: MELMON Investments Corporation
2902 NW 27th Avenue
Miami, Florida 33142

Officers: Antonio Melero
Rafael Monreal

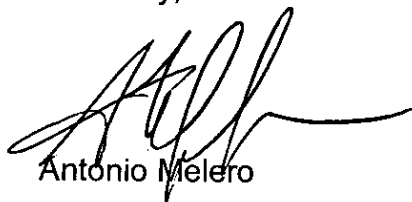
To whom it may concern,

Please accept this letter as notice that we never received the form in order to reinstate our corporation. We had a change of corporation name from MP Investments to MELMON Investments Corporation and an officer change from Ernesto Prato to Rafael Monreal. Mailing of said notification may have been crossed due to the said changes. Please accept our apologies.

At this time we would like to request that our corporation be reinstated in order to comply with Florida's regulations. Enclosed please find a check for the amount of one hundred and fifty dollars.

Thanking you in advance for you.

Sincerely,



Antonio Melero

Rafael Monreal

