

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90050 035 ***150.00

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1. Entity Name
MELO CONTRACTORS CORP.



Principal Place of Business
**615 NE 22 STREET
APT 101
MIAMI, FL 33137**

Mailing Address
**615 NE 22 STREET
APT 101
MIAMI, FL 33137**

60005216



2. Principal Place of Business
**275 N.E. 18 STREET
APT # 101**

3. Mailing Address
**275 N.E. 18 STREET
APT # 101**

01092006 Chg-P CR2E034 (11/05)

City & State
MIAMI FLORIDA
Zip
33132
Country
U.S.A.

City & State
MIAMI FLORIDA
Zip
33132
Country
U.S.A.

4. FEI Number
04-3648934
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DE MELO, CARLOS F
615 NE 22 STREET
APT 101
MIAMI, FL 33137**

7. Name and Address of New Registered Agent

Name
CARLOS FERREIRA DE MELO
Street Address (P.O. Box Number is Not Acceptable)
275 N.E. 18 STREET APT # 101
City
MIAMI FL Zip Code
33132

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]

CARLOS FERREIRA DE MELO /D

01/11/06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
D ☐ Delete
NAME
CARLOS FERREIRA DE MELO
STREET ADDRESS
615 NE 22 STREET
CITY - ST - ZIP
MIAMI, FL 33137

TITLE
D ☐ Delete
NAME
LAURA FERREIRA DE MELO
STREET ADDRESS
615 NE 22 STREET
CITY - ST - ZIP
MIAMI, FL 33137

TITLE
D ☐ Delete
NAME
DE MELO, JOSE LUIS F
STREET ADDRESS
615 NE 22 STREET APT #101
CITY - ST - ZIP
MIAMI, FL 33131

TITLE
D ☐ Delete
NAME
DE MELO, MARTIN F
STREET ADDRESS
615 NE 22 STREET APT 101
CITY - ST - ZIP
MIAMI, FL 33131

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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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 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 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:

[Signature] **MARTIN F. DE MELO /D**

01/11/06

305-577-8804

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #