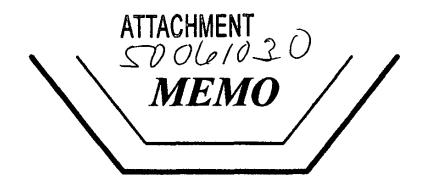
2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Aug 11, 2005 8:00 am Secretary of State **DOCUMENT # P04000095428** 08-11-2005 90003 021 ***150.00 MELAWIL CLEANING AND RESTORATION INC Principal Place of Business Mailing Address 50061030 1447 40TH STREET 1447 40TH STREET WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07192005 Chg-P CB2E034 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILLIAMS, MELVIN A Street Address (P.O. Box Number is Not Acceptable) **1447 40TH STREET** WEST PALM BEACH, FL 33407 City 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 tibe it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 7, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete MLE ☐ Change ☐ Addition WILLIAMS, MELVIN A NARE NAME **1447 40TH STREET** STREET ADDRESS STREET ADDRESS CMY-ST-ZIP WEST PALM BEACH, FL 33407 CITY-ST-ZIP TITLE TITLE Delete Change Addition WILLIAMS, MARIA 1447 40TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33407 CITY-ST-ZIP IIII F Delete MÆ Change Addition NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete MILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-77P TITLE ☐ Delcte TITLE ☐ Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE EIT) F Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS 12. I hereby certify that the information supplied with this fitting 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 Chepter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment yith an address, with all other ligo-empowered. SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED



TO: FLORIDA DEPARTMENT OF STATE

DATE: July 29, 2005

FROM: MELAWIL CLEANING AND

RESTORATION

RE: WAVIER OF LATE FEES

WE ARE WRITING REQUESTING A WAIVER OF THE \$400.00 LATE FEE DUE TO THE FACT THAT WE DIDN'T RECEIVE THE FIRST NOTICE UNTIL THE BEGINNING OF JULY. WE ARE ENCLOSING THE \$160.00 DUE NOW. WE UNDERSTAND THAT THIS LETTER OF REQUEST IS ALL THAT IS REQUIRED OF US AT THIS TIME. THANK YOU.

EIN: 20-1294565 DOC #P04000095428