


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000154624 1. Entity Name MELLOW YELLOW, INC.	
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Principal Place of Business 9875 FAIRWAY COVE LANE PLANTATION, FL 33324-2823	Mailing Address 9875 FAIRWAY COVE LANE PLANTATION, FL 33324-2823
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04262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1236047	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCCLEARY, TERENCE J
9875 FAIRWAY COVE LANE
PLANTATION, FL 33317-2823

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MCCLEARY, TERENCE J 9875 FAIRWAY COVE LANE FORT LAUDERDALE, FL 333242823
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MCCLEARY, MELINDA A 9875 FAIRWAY COVE LANE FORT LAUDERDALE, FL 333242823
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/15/07-80070-017 150.00

**DO NOT WRITE
IN THIS SPACE**

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 officers empowered.

SIGNATURE: Melinda A. McCleary Melinda A. McCleary 4/25/2007 954-587-5445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #