


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

1072

DOCUMENT # P06000135978		
1. Entity Name MELECHDAVID, INC.		

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JUL 20 PM 5:17

Principal Place of Business 7900 GLADES ROAD SUITE 330 BOCA RATON, FL 33434	Mailing Address 7900 GLADES ROAD SUITE 330 BOCA RATON, FL 33434
--	--

05/03/07 90033 030 \$150.00



2. Principal Place of Business; No P.O. Box # 17582 Bocaire Way Suite, Apt. #, etc.	3. Mailing Address 17582 Bocaire Way Suite, Apt. #, etc.
---	--

07172007 Chg-P CR2E034 (12/06)

City & State Boca Raton, FL	City & State Boca Raton, FL
Zip 33487	Zip 33487
Country Palm Beach	Country Palm Beach

4. FEI Number 56-2617808	Applied For <input type="checkbox"/> Not Applicable
-----------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent ENGELHARD, SHELDON ESQ 7900 GLADES ROAD SUITE 330 BOCA RATON, FL 33434	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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: \_\_\_\_\_ (NOTE: Registered Agent signature required when revisiting) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GROSSMAN, MARK % 7900 GLADES ROAD, SUITE 330 BOCA RATON, FL 33434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D Mark Grossman 17582 Bocaire Way Boca Raton, FL 33487 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Mark Grossman 7/8/07 05 of 4/2/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

2 of 2

ALAN S. HONIG  
CERTIFIED PUBLIC ACCOUNTANT  
1501 BROADWAY, SUITE 1313  
NEW YORK, NEW YORK 10036

ALAN S. HONIG, CPA  
WAYNE E. KRAFT, CPA  
CHERYL J. SPRINGER

(212) 764-1234  
FAX (212) 764-1197  
E-MAIL xcl2go@aol.com

July 18, 2007

Division of Corporations  
Attention: Gary Blankenbaker  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Mr. Blankenbaker,

Enclosed is a resubmitted 2007 For Profit Corporation Annual Report for Melechdavid, Inc. (document #P06000135978). The original 2007 Annual Report was submitted in May 2007.


It is our understanding that the original report was rejected and that it was mailed back with a cover letter indicating that Box 4 needed to be filled in with the FEI number. However, neither we nor our client, Mark Groussman (president of Melechdavid, Inc.), received that original report back with its cover letter. Mr. Groussman only became aware that there was problem when he received the Notice of Intent to Dissolve postcard.

It is also our understanding that the check for \$150.00 that paid the fee that was due with the original 2007 Annual Report was processed by the Division of Corporations and will be applied to the enclosed resubmitted Annual Report.

We ask for a waiver of the \$400 late fee because our client was not aware that the original report was returned since he did not receive it.

Please call (212) 764-1234 if you have any questions.

Sincerely,

  
Wayne Kraft

cc: Mark Groussman  
Enclosure