

FILED  
Feb 10 1998 8:00am  
Secretary of State

1. Corporation Name  
**MELDEN CORPORATION**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>11/18/1994</b>			
4. FEI Number <b>59-3310048</b>	<table border="1"> <tr> <td>Applied For</td> </tr> <tr> <td>Not Applicable</td> </tr> </table>	Applied For	Not Applicable
Applied For			
Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>		
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

10. Name and Address of New Registered Agent  
otnik  
s (P.O. Box Number is Not Acceptable)  
FL 85 Zip Code 32750-6359

**SIGNATURE** \_\_\_\_\_ (NO) \_\_\_\_\_ Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
32746	
<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
33418-8036	
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: David Blotnick 1/5/98 901-834-4800

CR2E034 (10/97)