

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000091824 (9)

1. Corporation Name

MELI, INC.



Principal Place of Business

Mailing Address

3121 NE 51ST STREET STE 303
FORT LAUDERDALE FL 33308

3121 NE 51ST STREET STE 303
FORT LAUDERDALE FL 33308

3. Date Incorporated or Qualified

3a. Date of Last Report

12/04/1995

2. Principal Place of Business

2a. Mailing Address

21 1831 BLOUNT RD.

26 1831 BLOUNT RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #B

27

City & State

City & State

23 POMPANO BEACH, FL.

28 POMPANO BEACH, FL.

Zip

Country

Zip

Country

24 33069

25 USA

29 33069

30 USA

4. FEI Number

Applied For

65-0637054

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MELI, RICHARD
3121 NE 51ST STREET STE 303
FORT LAUDERDALE FL 33308

81 Name (CORRECTION) MELI, RICHARD

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Type the name of the person who signed and the title, if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
P/S
MELI, RICHARD
3121 N.E. 51 STREET, #303
FORT LAUDERDALE, FL. 33308

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
V/T
MELI, PAUL I., III
5301 BAYVIEW DR.
FORT LAUDERDALE, FL. 33308

☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF FINANCING OFFICER OR DIRECTOR

Display Name

CR2E034 (3/96)