FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **P97000049622 (8)**

1. Corporation Name
ANMEL CORPORATION

Principal Place of Business	Mailing Address
1291 BAYSHORE BOULEVARD DUNEDIN FL 34698	1291 BAYSHORE BOULEVARD DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/03/1997

2. Principal Place of Business	2a. Mailing Address
21 1296 PEACH TREE DR.	26 1296 PEACH TREE DR.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 PALM HARBOR, FL.	City & State 28 PALM HARBOR, FL.
Zip 24 34683 Country 25 USA	Zip 29 34683 Country 30 USA

4. FEI Number: 59-3457449 ☐ Applied For ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MELHORN, MICHAEL V 1291 BAYSHORE BOULEVARD DUNEDIN FL 34698	81 Name 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MICHAEL V. MELHORN		1.2 NAME	
STREET ADDRESS	1296 PEACH TREE DR.		1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR, FL. 34683.		1.4 CITY-ST-ZIP	
TITLE	VICE. PRESIDENT	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ANDREA S. MELHORN		2.2 NAME	
STREET ADDRESS	240 CARYL WAY		2.3 STREET ADDRESS	
CITY-ST-ZIP	OLDSMAR, FL 34677		2.4 CITY-ST-ZIP	
TITLE	TREASURER	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MICHAEL V. MELHORN		3.2 NAME	
STREET ADDRESS	1296 PEACH TREE DR.		3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR, FL 34683		3.4 CITY-ST-ZIP	
TITLE	SECRETARY	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MICHAEL V. MELHORN		4.2 NAME	
STREET ADDRESS	1296 PEACH TREE DR.		4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR, FL 34683		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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: _____ 3/24/98 213-733-3703