

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000076969

Entity Name: MEL'S-NAPLES, INC.

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

3358 WOODS EDGE CIRCLE
102
BONITA SPRINGS, FL 34134

Current Mailing Address:

3358 WOODS EDGE CIRCLE
102
BONITA SPRINGS, FL 34134

New Principal Place of Business:

5051 CASTELLO DRIVE
222
NAPLES, FL 34103

New Mailing Address:

5051 CASTELLO DRIVE
222
NAPLES, FL 34103

FEI Number: 59-5085160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARAKOSTA, CHRIS J
3358 WOODS EDGE CIRCLE
102
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

TEREZI, KOSTIKA
5051 CASTELLO DRIVE
222
NAPLES, FL 34103 US

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.

SIGNATURE: KOSTIKA TEREZI

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: KARAKOSTA, CHRIS J
Address: 3358 WOODS EDGE CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VTD () Delete
Name: TEREZI, KOSTAQ
Address: 3680 TAMiami TRAIL NORTH
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KARAKOSTA, CHRIS J
Address: 5051 CASTELLO DRIVE #222
City-St-Zip: NAPLES, FL 34103

Title: PSTD (X) Change () Addition
Name: TEREZI, KOSTAQ
Address: 5051 CASTELLO DRIVE #222
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KOSTAQ TEREZI

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date