

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

07-30-2003 90065 012 ***550.00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000042760

1. Entity Name
MELYOL, INC.



Principal Place of Business
877 EXECUTIVE CEDAR DR
205
ST PETERSBURG FL 33702

Mailing Address
877 EXECUTIVE CEDAR DR
205
ST PETERSBURG FL 33702

2. Principal Place of Business
877 Executive Center Dr. W
Suite, Apt. #, etc.
205

3. Mailing Address
877 Executive Center Dr. W
Suite, Apt. #, etc.
205

City & State
St. Petersburg FL

City & State
St. Petersburg FL 33702

Zip
33702

Country
USA

Zip
33702

Country
USA

4. FEI Number 65-0920325

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

SPENCER, MARC G
877 EXECUTIVE CEDAR DR
205
ST PETERSBURG FL 33702

7. Name and Address of New Registered Agent

Name
Marc I. Spencer
Street Address (P.O. Box Number is Not Acceptable)
877 Executive Center Dr. W
205
City
St. Petersburg FL Zip Code
33702

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 Marc I. Spencer Marc I. Spencer 7/27/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	PTSD			<input type="checkbox"/>
	SPENCER, MELVIN D	1279 VIA VERDE WAY	PALM BEACH GARDENS FL 33418	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 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: MELVIN D SPENCER 7/27/03 561 99
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2ED34 (4/03)