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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Sorthe

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$29675

(3)

MELROSE ENTERPRISES INC.

FILED Jun 10 1997 8:00am Secretary of State



Principal Plac	ce of Business		Mailing	Mailing Address					***************************************		# 1 # 11 # I	#47 01 E	
P.O. BOX 653 VERO BEACH	19 FL 329 61			P.O. BOX 6539 VERO BEACH FL 32961-6539									
								3.	Date Incorporated or Qualific 02/04/1991		ate of /10/1		Report
	Place of Busine	oss	26. Mailing Address				4.	FEI Number	-		Α	pplied For	
Suite, Apt. #, etc.			26					59-3046039				N	ot Applicable
	. # , etc .		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional						
22 City & Star	ıto.		[27]	y & Clair									equired
23			— ·	City & State				6.	Election Campaign Financing Truck Fund Containution	\$5.00 May Be Added to Fees			
Zip		Country			Cou	ninz		+-	Trust Fund Contribution				
24	5	25	29		30			0.	 This corporation has liability Florida Statutes 	for intangible			s. 199.032,
		and Address of Curre		d Agent	100]			10.). Name and Address of New				·
. VEY	, JOHN E.					81	Name						
	S E. SANDP	OINTE LN.			1	82	Ctract Adde		D.O. Davidson in Marida				
	10 BEACH F						120		P.O. Box Number is Not Accept AVENCE	отаріе)			
•						83		ا <u>ب ک</u> ـــــ	J. HVOVV				
,											₁	· <u></u>	
						84	CITYERO	B	EACH	FL	85	Z ₂ 0	Code 968
11. Pursuant	to the provision	ons of Sections 607.05	02 and 607.1	508, Florida Statu	ites, the ab	ove	named corp	oratio	on submits this statement for the		f chan	ging i	ts registered
office or r	registered age am familiar witi	nt, or both, in the Stat n. and accept the oblid	e of Florida. S pations of, Sec	Buch charige was ction 607.0505. Fl	authorizec Iorida Stati	l by ules	the corporati	on's t	on submits this statement for the board of directors. I hereby ac	cept the app	oointm	ont as	registered
SIGNATURE		,	y		TOTAL OTHER								
SIGNATORE	Signature, typed o	r printed name of registered as	jent and title if app	ricable (NO	Tt Registered	Ager	Il signaturo require			DAI			
12.	1	OFFICERS AN	ND DIRECTOR		13.				ADDITIONS/CHANGES TO OF	FICERS AND	DIRE	CTOF	RS IN 12
TITLE	T8	=		☐ DELETE	1.1 TH	l F	49	100	62 Mª COURT		▼ C	nange	Addition
NAME	VEY, JOH				1.2 NA	Mξ	1	CAL	OBENCH FLB 2467				
STREET ADDRESS		ANDPOINTE LN.			1.3 \$1	REE1 /	ADDRESS /	0. -	Hox 8-003-				
CITY-ST-ZIP	AEKO RE	ACH FL 32983			1.4 CI1	Y - S1	-ZIP /5	W	- ASACH K- JU	461			
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NAME	VEY, PATE				2.2 NA	ME	20	2.Z	DX 2003	7			
STREET ADDRESS		ANDPOINTE LN.			2.3 STF	REETA	ADDRESS	.	Paren -	41			
CITY-ST-ZIP	AFKO RE	CH FL 32963		········	2 4 CF		7-ZIP	(d)	-BENCH TC 30	126			
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NAME					3.2 NA								
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NAME]			☐ Perrie	4.1 111							ange	Addition
STREET ADDRESS					4. 2 NA								
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CITY-ST-ZIP					6.4 CiT	Y - S1	- ZIP						!

I do 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 eath; 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 or an interference with an address.