2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55854

Entity Name: MEL-O-DEE T.V. OF ORLANDO, INC.

FILED Apr 25, 2004 Secretary of State

ncipal Place of Business:
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73 S. SEMORAN BLVD. ORLANDO, FL 32807 US

Current Mailing Address: New Mailing Address:

73 S. SEMORAN BLVD. 10167 SANDY MARSH CIRCLE ORLANDO, FL 32807 US ORLANDO, FL 32832 US

FEI Number: 65-0265626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARCIA, JOSE
73 S. SEMORAN BLVD
ORLANDO, FL 32807
US
GARCIA, JOSE
10167 SANDY MARSH CIRCLE
ORLANDO, FL 32807
US
ORLANDO, FL 32807
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: 04/25/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 GARCIA, JOSE,
 Name:

 Address:
 104 CRANDON BLVD. S-419
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

Name: KASTON, ERIC, Name: GARCIA, JOSE,

Address: 104 CRANDON BLVD. S-419 Address: 10167 SANDY MARSH CIRCLE

City-St-Zip: KEY BISCAYNE, FL City-St-Zip: ORLANDO, FL 32832

Name: KASTON, SEYMOUR, Name: GARCIA, JOSE,

Address: 104 CRANDON BLVD. S-419 Address: 10167 SANDY MARSH CIRCLE

City-St-Zip: KEY BISCAYNE, FL City-St-Zip: ORLANDO, FL 32807

Title: D () Delete Title: D (X) Change () Addition Name: KASTON, WARREN Name: GARCIA, JOSE

Address: 104 CRANDON BLVD S419 Address: 10167 SANDY MARSH CIRCLE

City-St-Zip: KEY BISCAYNE, FL City-St-Zip: ORLANDO, FL 32832

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSE GARCIA PD 04/25/2004