2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55854

Title:

Name:

Address:

City-St-Zip:

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

FILED Mar 23, 2009 Secretary of State

| | iid: MEE O DE | | | | |
|---|---------------------------|-----------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place of | New Principal Place of Business: | |
| 5837 DAHL UNIT G ORLANDO | | US | 5837 DAHLIA DRIVE ORLANDO, FL 32807 | US | |
| Current Mailing Address: | | | New Mailing Address: | New Mailing Address: | |
| | LORD LANDIN , FL 32832 | IGS HWY US | 10355 MALLARD LAND ORLANDO, FL 32832 | INGS WAY 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 | Name and Address of New Registered Agent: | |
| | LARD LANDIN | IGS WAY US | | | |
| The above in the State | | ubmits this statement for the pu | rpose of changing its registered | office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| Electronic Signature of Registered Agent | | | nt | Date | |
| Election Can | npaign Financing | Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | GARCIA, JOSÉ, | Delete D LANDINGS WAY 32832 | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | GARCIA, JOSE, | Delete D LANDINGS WAY 32832 | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | GARCIA, JOSE, | Delete D LANDINGS WAY 32807 | Title: (Name: Address: City-St-Zip: |) Change()Addition | |

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOSE R. GARCIA PD 03/23/2009

() Delete

10355 MALLARD LANDINGS WAY

GARCIA, JOSÉ

ORLANDO, FL 32832

() Change () Addition