**FILED** 

Feb 28, 2003 8:00 am Secretary of State 02-28-2003 90163 004 \*\*\*158.75

## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**

## S73496 **DOCUMENT #**

1. Entity Name

MELLIS R. MEYERS & CO., INC.

			7		
Principal Place of Business 11478 SW 73RD TERRACE MIAMI FL 33173-2605	Mailing Address 11478 SW 73RD TERRACE MIAMI FL 33173-2605	:		•	
2. Principal Place of Business	3. Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.		·····	☐ CHECK HERE IF MAKING	CHANGES	
City & State	City & State		4. FEI Number 65-0283644	Applied For Not Applicable	
_ ZipCountry	~- ·Zip · · · · · · · · · ·	- Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current R	egistered Agent	<u> </u>	7. Name and Address of New Registered		
		Name			
MEYERS, MELLIS R. 11478 SW 73RD TERRACE		Street Address	Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33173-2605					
n' y gi <sup>t</sup>		City	FL	Zip Code	
<ol><li>The above named entity submits this statement for the obligations of registered agent.</li></ol>	he purpose of changing its	registered office or registe	ered agent, or both, in the State of Florida. I am f	amiliar with, and accept	
SIGNATURE STATE					
SIGNATURE Signature, typed or printed name of registered agent and	d title if applicable. (NOTE	: Registered Agent signature require	ed when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of \$	State	S.M.	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10. OFFICERS AND D	IRECTORS	T 11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11	
TITLE C MEYERS, MELLIS R STREET ADDRESS 11478 SW 73 TER	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	
CITY-ST-ZIP MIAMI FL 33173-2605		CITY-ST-ZIP		;	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY- ST-ZIP		Change Addition	
TITLE	☐ Delete	TITLE		☐ Change ☐ Addition	

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

