

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000170139

**Entity Name:** MELBA LEE INC**Current Principal Place of Business:**1101 WILLOW PINE CT  
TAMPA, FL 33604**Current Mailing Address:**1101 WILLOW PINE CT  
TAMPA, FL 33604**FEI Number:** 76-0775546**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RIVERA, MELBA E  
1101 WILLOW PINE CT  
TAMPA, FL 33604 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:** MELBA E RIVERA

03/13/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                     |
|-----------------|---------------------|
| Title           | P                   |
| Name            | RIVERA, MELBA E     |
| Address         | 1101 WILLOW PINE CT |
| City-State-Zip: | TAMPA FL 33604      |

|                 |                     |
|-----------------|---------------------|
| Title           | TREA                |
| Name            | MARTINEZ, MELVIN    |
| Address         | 1101 WILLOW PINE CT |
| City-State-Zip: | TAMPA FL 33604      |

|                 |                      |
|-----------------|----------------------|
| Title           | MANAGER              |
| Name            | MARTINEZ, HECTOR J   |
| Address         | 8325 WILLOW BEACH DR |
| City-State-Zip: | RIVERVIEW FL 33578   |

|                 |                     |
|-----------------|---------------------|
| Title           | VP                  |
| Name            | RIVERA, CHARLES G   |
| Address         | 1101 WILLOW PINE CT |
| City-State-Zip: | TAMPA FL 33604      |

*I hereby 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 all other like empowered.*

**SIGNATURE:** CHARLES G RIVERA MARTINEZ

VP

03/13/2023

Electronic Signature of Signing Officer/Director Detail

Date