

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S55854

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

**Current Principal Place of Business:**

441 N HARBOR CITY BLVD  
SUITE A 8  
MELBOURNE, FL 32935

**Current Mailing Address:**

441 N HARBOR CITY BLVD  
SUITE A 8  
MELBOURNE, FL 32935 US

**FEI Number:** 65-0265626

**Certificate of Status Desired:** No

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

GARCIA, JOSE  
5837 DAHLIA DRIVE  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name GARCIA, JOSE  
Address 441 N HARBOR CITY BLVD  
SUITE A 8  
City-State-Zip: MELBOURNE FL 32935

Title SD  
Name GARCIA, JOSE  
Address 441 N HARBOR CITY BLVD  
SUITE A 8  
City-State-Zip: MELBOURNE FL 32935

Title TD  
Name GARCIA, JOSE  
Address 441 N HARBOR CITY BLVD  
SUITE A 8  
City-State-Zip: MELBOURNE FL 32935

Title D  
Name GARCIA, JOSE  
Address 441 N HARBOR CITY BLVD  
SUITE A 8  
City-State-Zip: MELBOURNE FL 32935

*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:** JOSE GARCIA

**PRESIDENT**

**04/27/2016**

Electronic Signature of Signing Officer/Director Detail

Date