

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 344151

1. Entity Name

MELDISCO K-M PLANT CITY, FL., INC.

3821

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90382 042 \*\*\*150.00

Principal Place of Business	Mailing Address
W ALEXANDRIA ST CITY FL 33566	933 MACARTHUR BLVD. MAHWAH NJ 07430-2045

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	13-2634187	Applied For
		Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY  
1201 HAYES ST  
SUITE 105  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	V <input type="checkbox"/> Delete	TITLE	KATHLEEN GUINNESSY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PROFFITT, RANDALL S	NAME	
STREET ADDRESS	933 MACARTHUR BLVD.	STREET ADDRESS	933 MacARTHUR BLVD., MAHWAH, NJ 07430
CITY-ST-ZIP	MAHWAH NJ	CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHEPARD, JEFFREY	NAME	
STREET ADDRESS	933 MACARTHUR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	MAHWAH NJ	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALIZZI, ANTHONY	NAME	
STREET ADDRESS	3100 W.BIG BEAVER	STREET ADDRESS	
CITY-ST-ZIP	TROY MI	CITY-ST-ZIP	
TITLE	AT <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOJNO, THOMAS	NAME	
STREET ADDRESS	933 MACARTHUR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	MAHWAH NJ	CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDS, MAUREEN	NAME	
STREET ADDRESS	933 MACARTHUR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	MAHWAH NJ	CITY-ST-ZIP	
TITLE	AT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUMLIN, THOMAS	NAME	
STREET ADDRESS	933 MACARTHUR BLVD.	STREET ADDRESS	
CITY-ST-ZIP	MAHWAH NJ 07430	CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDALL S. PROFFITT APR 18 2000 (201) 934-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)