


**2004 FOR PROFIT CORPORATION
REINSTATEMENT**

900.00

30 1437-ANR2004

DOCUMENT # 344152 1. Entity Name MILES MELDISCO K-M MOBILE H'WAY.FLA.. INC.	
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05 MAY 12 8:30

Principal Place of Business 4211 MOBILE HWY PENSACOLA, FL 32506 US	Mailing Address 933 MACARTHUR BLVD. MAHWAH, NJ 07430
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

REINSTATEMENT



04-05

6. Name and Address of Current Registered Agent UNITED STATES CORPORATION-COMPANY 1201 HAYS STREET 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
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00		
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P SHEPARD, JEFFREY 933 MACARTHUR BLVD. MAHWAH, NJ	TITLE	<div style="text-align: right;">900055189659</div> <div style="text-align: right;">05/24/05--01045--013 **900.00</div>
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	V PROFFITT, RANDALL S 933 MACARTHUR BLVD. MAHWAH, NJ	TITLE	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	AT BAUMLIN, THOMAS 933 MACARTHUR BLVD. MAHWAH, NJ 07430	TITLE	TREASURER
<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	S RICHARS, MAUREEN 933 MACARTHUR BLVD MAHWAH, NJ	TITLE	VINCENT ZANNA
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		TITLE	1 CROSFIELD AVE, WEST NYACK, NY 10994
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		TITLE	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		TITLE	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: VINCENT ZANNA MAY 1 2005

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

VINCENT ZANNA