FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 347637

1. Corporation Name

MILES MELDISCO K-M 66 ST FLA INC

Mailing Address

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90067 031 ***150.00



Principal Place	e or business	Mailing Address			
4501 66TH ST I	933 MACARTHUR BLVD.	iur BLVD.			
ST PETERSBUR	G FL 33709	MAHWAH NJ 07430			00 107 117 117 117 00105
US					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					06/09/1969
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
	300 01 200113-5	26			13-2641255 Not Applicable
21	H _ L _		Suite, Apt. #, etc.		\$8.75 Additional
Suite, Apt. #, etc.		 			5. Certificate of Status Desired Fee Required
22		27		_	
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be
		28	·{		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Intangible
24	25	29 30	0		Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current	17.1			10. Name and Address of New Registered Agent
	J. Halling and Hallington C. California		8	1 Name	
UNITED STATES CORPORATION COMPANY					
1201 HAYS STREET				2 Street	Address (P.O. Box Number is Not Acceptable)
		L			
	E 105		8:	3	
TALL	AHASSEE FL 32301		<u> </u>		loc 7:- Oode
			8	4 City	FL 85 Zip Code
	40 40 507 0500	4500 Florido Ptobatos	460 060	namad	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	a Statute	Ş.	• • • • • • • • • • • • • • • • • • • •
SIGNATURE					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Ag	ent signature r	required when reinstating) DATE
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	V	☐ DELETE	1.1 TITLE		Change Addition
	PROFFITT, RANDALL S		1.2 NAME	:	
NAME			1		
STREET ADDRESS	933 MACARTHUR BLVD.		1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	MAHWAH NJ		1.4 CITY-	ST-ZIP	D Observe D Addition
TITLE	D	DELETE 2.1 TI			Change Addition
NAME	PALIZZI, ANTHONY		2.2 NAME		
STREET ADDRESS	3100 W.BIG BEAVER		23 STRE	ET ADDRESS	
			1		
CITY-ST-ZiP	TROY MI	□ DELETE	2.4 CITY	_	☐ Change ☐ Addition
TITLE	P	☐ DELETE	3.1 TITLE		
NAME	SHEPARD, JEFFREY		3.2 NAME		
STREET ADDRESS	933 MACARTHUR BLVD.		3.3 STRE	ET ADDRESS	
CITY-ST-ZIP	MAHWAH NJ		3.4. CITY	-ST-ZIP	
TITLE	AT	☐ DELETE	4.1 TITLE	_	☐ Change ☐ Addition
		—	4. 2 NAMI		
NAME	WOJNO, THOMAS				·
STREET ADDRESS	933 MACARTHUR BLVD.	/	4.3 STRE	ET ADDRESS	, X
CITY-ST-ZIP	MAHWAH NJ		4.4 CITY-	ST-ZIP	
TITLE	AT	DELETE	5.1 TITLE		ASSI, TREAS. Change Maddition
 NAME	JOHNSON, MARK		5.2 NAME	i	77101440 7944
1	933 MACARTHUR BLVD.		5.3 STRE	ET ADDRESS	THOMAS BAUMLIN
STREET ADDRESS			5.4 CITY-		933 MacARTHUR BLVD., MAHWAH, NJ 07430
C/TY-ST-Z/P	MAHWAH NJ		6.1 TITLE		Change Addition
TITLE	S	☐ DELETE			
NAME	RICHARDS, MAUREEN		6.2 NAME		
STREET ADDRESS	933 MACARTHUR BLVD		6.3 STRE	ET ADDRESS	
	MALIMAL NI		64 CITY.	ST. 7IP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

14. The receiver of the component of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. BAUMLING TREAS.

APR 0. 1 1999 (2071) 024 5000 FREAS.