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

PROJIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 347638

1. Corporation Name

Principal Place of Business

MILES MELDISCO K-M ROSERY RD FLA INC

\$ 1410

Mailing Address

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90067 030 ***150.00



1000 MISSOURI AV LARGO FL 33540 US		933 MACARTHUR BLVD. MAHWAH NJ 07430		DO NOT WRITE IN THIS	SPACE	· · · · · · · · · · · · · · · · · · ·		
					3. Date Incorporated or Qualifed 06/09/1969			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			13-2639927		Not Applicable	•
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.7	5 Additional		
22		27			5. Certifcate of Status Desired	Fe	e Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country 25	Zip Cour 29 30			8. This corporation owes the current year Intangible Personal Property Tax.			
	9. Name and Address of Current	 	1	****	10. Name and Address of New Registered	Agent		
		<u> </u>	81	Name				
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET			82	Street Addr	tress (P.O. Box Number is Not Acceptable)			
SUITE 105			83					-
TALLAHASSEE FL 32301								
,,,			84	City	F!	85	Zip Code	
		and CO7 1509 Florida Statutos	the above	named com	Accration submits this statement for the numose of	changin	o its registered	
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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE		MOTE: Por	ristand Agen	et elonatura racuira	od when reinstating) DATE			
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	it signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTORS IN 12	7 5
12.	V	DELETE DELETE	1,1 TITLE		7,001,10,10,01,11,1020 10 077,102,107,1	Cha		חנ
NAME	PROFFITT, RANDALL S	2, 5022.12	1.2 NAME			_		
" "	933 MACARTHUR BLVD.			ADDRESS				8
STREET ADDRESS			1.4 CITY-S					}
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TITLE	<u> </u>							
NAME	orier And, der the		2.2 NAME					
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CITY-ST-ZIP			2. 4 CITY+S	ST-ZIP		☐ Cha	nge Additio	20
TITLE			3.1 TITLE				uiða □ vógini	~
NAME	PALIZZI, ANTHONY		3.2 NAME					- 1
STREET ADDRESS	3100 W. BIG BEAVER		3.3 STREET	TADDRESS				1
CITY-ST-ZIP	TROY MI		3.4. C/TY-S	T-ZIP				_
TITLE	AT	☐ DELETE	4.1 TITLE			☐ Cha	nge 🔲 Additio	ותנ
NAME	Wojno, Thomas		4. 2 NAME					
STREET ADDRESS	933 MACARTHUR BLVD.	,	4.3 STREET	TADDRESS				,
CITY-ST-ZIP	MAHWAH NJ	/	4.4 CITY-S		<u> </u>		<u>`</u>	
TITLE	AT	DELETE	5.1 TITLE	Α	SST TREAS.	Cha	nge 🔽 Additi	חנ
NAME	JOHNSON, MARK		5.2 NAME	1	HOMAS BAUMLIN			
STREET ADDRESS	933 MACARTHUR BLVD.		5.3 STREE	TADDRESS 03	R MacARTHID BLVD MAIDMAIL ALL	07400		
CITY-ST-ZIP	MAHWAH NJ		5.4 CITY-S	T-ZIP	3 MacARTHUR BLVD., MAHWAH, NJ	U/430	t	
TITLE	S	☐ DELETE	6.1 TITLE	<u> </u>		☐ Cha	nge 🗌 Additio	on.
NAME	RICHARDS, MAUREEN		6.2 NAME					
STREET ADDRESS	*** *** *** ***		6.3 STREET	T ADDRESS				
SIKEEI AUURESS	AAAAAAAAAAAA		EACITY S		•			1

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:

CK2E034 (11/98)