

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

FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 348512 (5)
1. Corporation Name
MILES MELDISCO K-M BEACH BLVD FLA INC #1413



Principal Place of Business
5751 BEACH BLVD
JACKSONVILLE FL 32207
US

Mailing Address
933 MACARTHUR BLVD.
MAHWAH NJ 07430

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/24/1969	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 13-2657962		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
81. Name					
82. Street Address (P.O. Box Number is Not Acceptable)					
83.					
84. City				85. Zip Code	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE	11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	SHEPARD, JEFFREY		12. NAME				
STREET ADDRESS	933 MACARTHUR BLVD.		13. STREET ADDRESS				
CITY-ST-ZIP	MAHWAH NJ		14. CITY-ST-ZIP				
TITLE	V	<input type="checkbox"/> DELETE	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	PROFFITT, RANDALL S		22. NAME				
STREET ADDRESS	933 MACARTHUR BLVD.		23. STREET ADDRESS				
CITY-ST-ZIP	MAHWAH NJ		24. CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> DELETE	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	PALIZZI, ANTHONY		32. NAME				
STREET ADDRESS	3100 W.BIG BEAVER		33. STREET ADDRESS				
CITY-ST-ZIP	TROY MI		34. CITY-ST-ZIP				
TITLE	AT	<input type="checkbox"/> DELETE	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	WOJNO, THOMAS		42. NAME				
STREET ADDRESS	933 MACARTHUR BLVD.		43. STREET ADDRESS				
CITY-ST-ZIP	MAHWAH NJ		44. CITY-ST-ZIP				
TITLE	S	<input type="checkbox"/> DELETE	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	RICHARDS, MAUREEN		52. NAME				
STREET ADDRESS	933 MACARTHUR BLVD.		53. STREET ADDRESS				
CITY-ST-ZIP	MAHWAH NJ		54. CITY-ST-ZIP				
TITLE	AT	<input checked="" type="checkbox"/> DELETE	61. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	KAKAR, MANOHAR		62. NAME	MARK JOHNSON			
STREET ADDRESS	933 MACARTHUR BLVD.		63. STREET ADDRESS				
CITY-ST-ZIP	MAHWAH NJ		64. CITY-ST-ZIP				

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.

SIGNATURE *Mark Johnson* AGENT, FLORIDA, APR 14 1998 (01) 934-2000

CR2E034 (10/97)