## 2000 UNIFORM BUSINESS REPORT (UBR)

## May 01, 2000 8:00 am Secretary of State **DOCUMENT # 348512** 1. Entity Name 1413 MILES MELDISCO K-M BEACH BLVD FLA INC 05-01-2000 90378 042 \*\*\*150.00 Mailing Address Principal Place of Business 933 MACARTHUR BLVD. ## BEACH BLVD MAHWAH NJ 07430-2045 = SCHOOL F FL 32207 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-2657962 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. KATHLEEN GUINNESSEY ☐ Change TITLE ☐ Delete TITLE SHEPARD, JEFFREY NAME NAME 933 MACARTHUR BLVD. STREET ADDRESS STREET ADDRESS 933 MacARTHUR BLVD., MAHWAH, NJ 07430 CITY-ST-ZIP CITY-ST-ZIP MAHWAH NJ ☐ Change Addition ☐ Delete TITLE PROFFITT, RANDALL S NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAHWAH NJ ☐ Change ☐ Addition Delete TITLE TITLE PALIZZI, ANTHONY NAME NAME STREET ADDRESS STREET ADDRESS 3100 W.BIG BEAVER CITY-ST-ZIP CITY-ST-ZIP TROY MI ☐ Addition Delete TITLE TITLE WOJNO, THOMAS NAME NAME STREET ADDRESS STREET ADDRESS 933 MACARTHUR BLVD. CITY-ST-7IP CITY-ST-ZIF MAHWAH NJ ☐ Addition Change ☐ Delete TITLE TITLE RICHARDS, MAUREEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAHWAH NJ ☐ Addition ☐ Delete TITLE ☐ Change TITLE BAUMLIN, THOMAS NAME NAME 933 MACARTHUR BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAHWAH NJ 07430 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 a formation. Block 12 if changed, or on an attachment with an address, with all other like empowered.

``[`**\_**". SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF WEER OR DIRECTOR

KATHLEEN GUINNESSEY

(201) 934-2000

**FILED** 

Daytime Phone #