


900.00

30/629 ANR 04

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 372640 1. Entity Name MILES MELDISCO K-M BRADENTOWN, FLA., INC.	
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FILED

05 MAY 12 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 4124 14TH ST W BRADENTON, FL 33505 US	Mailing Address 933 MACARTHUR BLVD. MAHWAH, NJ 07430
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

11182004 REIN-P CR2E098 (6/04)

4. FEI Number 13-2667905	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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 <u>Lynette Coleman</u> Signature, typed or printed name of registered agent and title if applicable.	Lynette Coleman as its agent	5-18-05 DATE
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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																								
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 1 2005

Date

Daytime Phone #

VINCENT ZANNA

5/19/05