## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Apr 27, 2001 8:00 am Secretary of State **DOCUMENT # 405962** MELDISCO K-M APALACHEE PKW., FLA, INC (19/1891) (1735) 1. Entity Name 2001 90276 003 \*\*\*150 00 Principal Place of Business Mailing Address 1701 APALACHEE PKWY 933 MACARTHUR BLVD. TALLAHASSEE FL 32301 MAHWAH NJ 07430 959189 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 22-1970004 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City Zip Code 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 (NO\*E: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150,00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition PROFITT, RANDALL S NAME NAME 933 MACARTHUR BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7iP MAHWAH NJ CITY-ST-7IS TITLE ☐ Delete THLE Change ☐ Addition SHEPARD, JEFFREY NAME NAME 933 MACARTHUR BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAHWAH NJ CITY-ST-7iP TITLE ☐ Delete TITLE Change ☐ Addition GUINNESSEY, KATHLEEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY - ST - ZIP MAHWAH NJ 07430 CITY-S1-ZIF TITLE ☐ Delete TITLE ☐ Change Addition BAUMLIN, THOMAS NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY-ST-ZIP TIFLE ☐ Delete TITLE Change Addition RICHARDS, MAUREEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD STREET ADDRESS CITY-ST-76 MAHWAH NJ CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP I hereby certify that the information supplied with this filling 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 empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. (201) **934-2000**

THOMAS WOJNO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 1 6 200°

Daytime Phone #