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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

ORLANDO FL 32009

7825 8 ORANGE BLOSSOM TR

451112

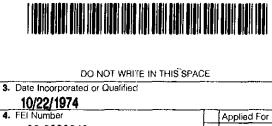
Mailing Address

933 MACARTHUR BLVD.

MAHWAH NJ 07430

MELDISCO K-M S. ORANGE BLOSSOM TR., FLA., INC. \$1945

## **FILED** May 14 1998 8:00am Secretary of State



Principal Place of Business		2a. Mading Address				4. FEI Number			Applied For	
]	_	26				22-2032243			Not Applicable	
Suite, Apt. #, etc. Sc. 27		·	Suite, Apt. #, etc.			5. Certificate of Status Desired			\$8.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fee			5.00 May Be dded to Fees	
Zip	Country 25	Zip 29	Country 30		,	8. This corporation owes or has Personal Property Tax due J		urrent year Intangible Yes No		
	t	10. Name and Address of				New Registered Agent				
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81	Name					
				82						
				83						
				84	City		F	L 85	Zip Code	
office or	t to the provisions of Sections 607, registered agent, or both, in the Sam familiar with, and accept the of	ate of Florida. Such ch	ange was authorize	d by	the corporati	oration submits this statement for the on's board of directors. I hereby ac	ne purpose scept the a	of chang ppointme	ging its registered ant as registered	
IGNATURE			· <del></del>							
Signature, typed or profed name of registered agent and life if applicable				d Ago	int signature require	od when reinstating) DATE				
2. OFFICERS AND DIRECTORS		<b>i</b> 13	<b>i</b> 13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					

agent. I ar	n tamiliar with, and accept the obligations of, Section	n 607.0505, Fioric	da Statutes.			
SIGNATURE	Signature typed or proflect have at registered agent and life it applical	de (NOIE-F	Registered Agent signature	e required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	5	DELETE	1.1 THLE		☐ Change	Addition
NAME	Palizzi, anthony		1,2 NAME			
STREET ADDRESS	\$100 W. BIG BEAVER		1.3 STREET ADDRESS			•
CITY-ST-ZIP	TROY MI		1.4 CITY-ST-ZIP	]		
TITLE	V	DELETE	2 1 1/TLE		☐ Change	Addition
NAME	PROFFITT, RANDALL S.		22 NAME			
STREET ADDRESS	933 MACARTHUR BLVD.		2.3 STREET ADDRESS			
CITY-ST-ZIP	Mahwah nj		2. 4 CITY - ST - ZIP			
TITLE	7	DELETE	3.1 TITLE		Change	Addition
NAME	\$HEPARD, JEFFREY		3.2 NAME			
STREET ADDRESS	\$33 MACARTHUR BLVD.		3.3 STHEET ADDRESS			
CITY-ST-ZIP	MAHWAH NJ		3.4. CITY - ST - 2IP			
TITLE	ĀŤ	DELETE	4.1 TITLE		☐ Change	Addition
NAME	WOJNO, THOMAS		4, 2 NAME			
STREET ADDRESS	<b>933 MACARTHUR BLVD.</b>		4.3 STREFT ADDRESS			
CITY-ST-ZIP	MAHWAH NJ	/	4.4 CITY - ST - ZIP		,	
TITLE	AT	DELETE	5.1 TITLE	AT	Change	Addition
NAME	Kakar, manohar		5.2 NAME	MARK JOHNSON		
STREET ADDRESS	<b>93</b> 3 MACARTHUR BLVD.		5.3 STREET ADDRESS	MALIKOOTAGO		
CITY-ST-ZIP	Mahwah nj		5.4 CITY - ST - ZIP			
TITLE	\$	DELETE	6.1 TITLE		Change	Addition
NAME	RICHARDS, MAUREEN		6.2 NAME			
STREET ADDRESS	933 MACARTHUR BLVD.		6.3 STREET ADDRESS			
CITY-ST-ZIP	MAHWAH NJ		6.4 CITY - ST - ZIP			

14. Thereby 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.

11) 534-2000<sup>1</sup>