## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 27, 2001 8:00 am Secretary of State **DOCUMENT # 515051** MELDISCO K-M PALMETTO PK. RD., FLA., INC. (2281) 04-27-2001 90276 008 \*\*\*150.00 Principal Place of Business Mailing Address 1401 W PALMETTO PK RD 933 MACARTHUR BLVD. **BOCA RATON FL 33432** MAHWAH NJ 07430 959184 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 22-2124988 Not Applicable Zin Country 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 (NOTE: 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 PROFFITT, RANDALL S. NAME MAME 933 MACARTHUR BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAHWAH NJ CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition SHEPARD, JEFFREY NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-7IP MAHWAH NJ CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition GUINNESSEY, KATHLEEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME BAUMIN, THOMAS NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-ZIP MAHWAH NJ CITY-ST-ZIP TIT1 F ☐ Delete ☐ Change Addition RICHARDS, MAUREEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-7IP MAHWAH NJ CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (10/00)

THOMAS WOJNO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: =