

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 533808

1. Entity Name

MELDISCO K-M MARGATE, FLA., INC. 2382

Principal Place of Business

Mailing Address

560 N STATE RD 7  
MARGATE FL 33063  
US

933 MACARTHUR BLVD.  
MAHWAH NJ 07430-2045

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-2153234

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME PALIZZI, ANTHONY  
STREET ADDRESS 3100 W.BIG BEAVER  
CITY-ST-ZIP TROY MI ☐ Delete

TITLE P  
NAME SHEPARD, JEFFREY  
STREET ADDRESS 933 MACARTHUR BLVD.  
CITY-ST-ZIP MAHWAH NJ ☐ Delete

TITLE V  
NAME PROFITT, RANDALL S.  
STREET ADDRESS 933 MACARTHUR BLVD.  
CITY-ST-ZIP MAHWAH NJ ☐ Delete

TITLE AT  
NAME WOJNO, THOMAS  
STREET ADDRESS 933 MACARTHUR BLVD.  
CITY-ST-ZIP MAHWAH NJ ☒ Delete

TITLE S  
NAME RICHARDS, MAUREEN  
STREET ADDRESS 933 MACARTHUR BLVD  
CITY-ST-ZIP MAHWAH NJ ☐ Delete

TITLE AT  
NAME BAUMIN, THOMAS  
STREET ADDRESS 933 MACARTHUR BLVD.  
CITY-ST-ZIP MAHWAH NJ ☐ Delete

TITLE KATHLEEN GUINNESSSEY  
NAME  
STREET ADDRESS 933 MacARTHUR BLVD., MAHWAH, NJ 07430  
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

KATHLEEN GUINNESSSEY  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 18 2000

(201) 934-2000

Date

Daytime Phone #

CR2F034 (9/00)