

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 539880 (5)
1. Corporation Name
MELDISCO K-M GAINESVILLE, FLA., INC. #4047



Principal Place of Business 933 MACARTHUR BLVD. MAHWAH NJ 07430	Mailing Address 933 MACARTHUR BLVD MAHWAH NJ 07430 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2552 N.W. 13TH ST. Suite, Apt. #, etc. 22 City & State 23 GAINESVILLE, FL Zip 24 32605 25 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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3. Date Incorporated or Qualified 07/25/1977	4. FEI Number 22-2162303	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYES ST SUITE 105 TALLAHASSEE FL 32301	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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10. Name and Address of New Registered Agent
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	V
NAME	PROFFITT, RANDALL S
STREET ADDRESS	933 MACARTHUR BLVD.
CITY-ST-ZIP	MAHWAH NJ
TITLE	D
NAME	PALIZZI, ANTHONY
STREET ADDRESS	3100 W. BIG BEAVER
CITY-ST-ZIP	TROY MI
TITLE	PD
NAME	SHEPARD, JEFFREY
STREET ADDRESS	933 MACARTHUR BLVD
CITY-ST-ZIP	MAHWAH NJ
TITLE	AT
NAME	WOJNO, THOMAS
STREET ADDRESS	933 MACARTHUR BLVD.
CITY-ST-ZIP	MAHWAH NJ
TITLE	AT
NAME	KAKAR, MANOHAR
STREET ADDRESS	933 MACARTHUR BLVD.
CITY-ST-ZIP	MAHWAH NJ
TITLE	S
NAME	RICHARDS, MAUREEN
STREET ADDRESS	933 MAC ARTHUR BLVD
CITY-ST-ZIP	MAHWAH NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	AT
5.3 STREET ADDRESS	MARK JOHNSON
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE _____ TREAS. APR 0 1 1998 (201) 934-2000

CR2E034 (10/97)