30a7(va-Anra) 2002 UNIFORM BUSINESS REPORT (UBR)

621103 **DOCUMENT#** 1. Entity Name

MELDISCO K-M PORT ORANGE FLA., INC.

FILED Aug 01, 2002 8:00 am Secretary of State 08-01-2002 90165 006 ***550.00

Principal Place of Business 3813 NOVA ROAD PORT ORANGE FL 32019		Mailing Address 933 MAC ARTHUR BLVD MAHWAH NJ 07430 US		B0133245			
2. Principal	Place of Business	3. Mailing Address			- THE THE BATTO HERD LADEL LADEL LADEL BRIDGE WITH CHERK BASKI BASKI BASKI DIGHT BERT DIGHT BENT TO BE A SECTION OF THE SECTIO		
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN T	HIS SPACE	
City & Sta	ate	City & State		4.	4. FEI Number 22-2253162 Applied For Not Applicable		
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Ac	dditional
	6. Name and Address of Current F	legistered Agent		7.	Name and Address of New Registe		
				Name			
UNITED STATES CORPORATION COMPANY			Stree	et Address (P.O. I	ddress (P.O. Box Number is Not Acceptable)		
1201 HAYES STREET STE. 105							
	ASSEE FL 32301						
IALLANA	133EE FL 323U1		City			Zip Co	de
8. The abov	e named entity submits this statement for ations of registered agent.	the purpose of changing its re	egistered offic	e or registered aç	gent, or both, in the State of Florida. I	am familiar with	, and accept
the obliga	adons of registered agent.						
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable (AIOTE)	Danishand Association				
				gnature required when r	einstating) DA	ATE	
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 \$550.00 After September 13, 2002 Fee will be \$750 Make Check Payable to Department of Sta		ll be \$750.00	10. Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees
11.	OFFICERS AND D	IRECTORS	12.	ΑC	DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 11
TITLE	V	☐ Delete	TITLE		***************************************	☐ Change	Addition
NAME	PROFFITT, RANDALL S 933 MACARTHUR BLVD.		NAME				
STREET ADDRESS CITY-ST-ZIP	MAHWAH NJ		STREET ADDRE	SS			
TITLE	AT	☐ Delete	TITLE				
NAME	GUINNESSEY, KATHLEEN	L. Delete	NAME	j		☐ Change	☐ Addition
STREET ADDRESS	933 MACARTHUR BLVD.		STREET ADDRES	is			
CITY-ST-ZIP	MAHWAH NJ 07430		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS	Shepard, Jeffrey 933 macarthur blvd:		NAME STREET ADDRES		- .		
CITY-ST-ZIP	MAHWAH NJ		CITY-ST-ZIP	15			
TITLE	AT	☐ Delete	TITLE			[7] Change	☐ Addition
NAME	BAUMIN, THOMAS	D01010	NAME			C cuange	L. Addition
STREET ADDRESS	933 MACARTHUR BLVD.		STREET ADDRES	s			
CITY-ST-ZIP	MAHWAH NJ		CITY-ST-ZIP	1			
TITLE NAME	S NATIONAL MATERIAL	☐ Delete	TITLE			Change	☐ Addition
STREET ADDRESS	RICHARDS, MAUREEN 933 MACARTHUR BLVD		NAME STREET ADDRESS				
CITY-ST-ZIP	MAHWAH NJ		CITY-ST-ZIP	<u> </u>			
TITLE		☐ Delete	TITLE	+		☐ Change	☐ Addition
NAME			NAME				
STREET ADDRESS			STREET ADDRES	s			
CITY-ST-ZIP	J		CITY-ST-ZIP	1			

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 opporation 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:

UR EXAPPLEEN GUINNESSEY

JUL 2 4 2002

(201) 934-2000