FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED
AND
FILED

95 APR -1 PM 11:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 660493 (8)

1. Corporate Name
MELDISCO K-M LAKELAND, FL., INC. (3423)

Principal Place of Business
4275 US 98 NORTH
LAKELAND FL 33805

Mailing Address
4275 US 98 NORTH
LAKELAND FL 33805

FOR OFFICE USE ONLY

3. Date Incorporated or Qualified: 03/26/1980
3a. Date of Last Report: 04/29/1994

4. FEI Number: 22-2299918 — Applied For / Not Applicable

5. Certificate of Status (desired) — $8.75 Additional Fee Required

6. Limited Partnership (name of) General Partner — $5.00 May Be Added to Fees

8. Does corporation own beverage license(s) under Chapter 561, Florida Statutes? Yes X No

9. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYES STREET
STE. 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of section 607.1622, Florida Statutes, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature

12. Officers and Directors

	PD
NAME	ROBINSON, JOHN
	933 MACARTHUR BLVD.
	MAHWAH NJ
	VST
NAME	FALKOFF, MARTIN
	933 MACARTHUR BLVD.
	MAHWAH NJ
	AT
NAME	WEINFUSS, STEWART
	933 MACARTHUR BLVD.
	MAHWAH NJ
	D
NAME	FALKOFF, MARTIN
	933 MACARTHUR BLVD
	MAHWAH NJ
	D
NAME	PALIZZI, ANTHONY
	3100 W. BIG BEAVER
	TROY MI
	AT
NAME	KAKAR, MANOHAR
	933 MACARTHUR BLVD.
	MAHWAH NJ

13. Additional Officers and Directors Authorized to Act for Corporation

14. I hereby certify that the information supplied with this report is true, accurate and complete as of the date of this report. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall serve as my signature and authorization to any proper officer of the corporation named herein to prepare, execute and deliver this report. I am aware that false information submitted in a report is punishable as a felony under Chapter 817.155, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered officers and directors.

SIGNATURE: M. [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MANOHAR KAKAR APR 26 1995 (201) 934-2000
Date Telephone Number

03133A0 CP