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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 660493

1. Corporation Name

Principal Place of Business

MELDISCO K-M LAKELAND, FL., INC. #3423

Mailing Address

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90067 016 ***150.00



4275 US 98 NORTH LAKELAND FL 33805		933 MACARTHUR BLVD MAHWAH NJ 07430 US		DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE			
i		•			3. Date Incorporated or Qualifed 03/26/1980			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	_ []	Applied For	
21		26			22-2299918		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	5. Certifcate of Status Desired \$8.75 Additional Fee Required		
City & State		City & State		•	6. Election Campaign Financing Trust Fund Contribution			
Zip	Country Zip Cou		Countr	ountry 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No			□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registere	d Agent		
-			81	l Nan	ne		}	
UNITED STATES CORPORATION COMPANY 1201 HAYES STREET			82	2 Stre	et Address (P.O. Box Number is Not Acceptable)			
STE.	105		83	3				
TALL	AHASSEE FL 32301			ļ		11 -:	- 6-4	
	•		84	City	F	L 85 Zi	p Code	
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	Signature, typed or printed name of registered agent	t and title if applicable (NOTE: R	legistered Age	ent signatu	ure required when reinstating) DATE	<u> </u>		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	TORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE			☐ Chang		
NAME	SHEPARD, JEFFREY		1.2 NAME					
STREET ADDRESS	933 MACARTHUR BLVD.		1.3 STRE	ET ADDRE	ess			
CITY-ST-ZIP	MAHWAH NJ		1.4 CITY-					
TITLE			2.1 TITLE	_		☐ Chang	e 🔲 Addition	
NAME			2.2 NAME					
	933 MACARTHUR BLVD.		2.3 STREI		222			
STREET ADDRESS			2. 4 CITY-				l	
CITY-ST-ZIP			3.1 TITLE			☐ Chang	e Addition	
TITLE			3.2 NAME					
NAME	933 MACARTHUR BLVD.			: ET ADDRE	200		J	
STREET ADDRESS	ACAM MAISA A ARE							
CITY-ST-ZIP	S S	☐ DELETE	3.4. CITY- 4.1 TITLE			Chang	e Addition	
TITLE	RICHARDS, MAUREEN		4.1 HILL			_ •	_	
NAME	933 MACARTHUR BLVD				200		}	
STREET ADDRESS	MAHWAH NJ		4.3 STRE		-50			
CITY-ST-ZIP		☐ DELETE	4.4 CITY- 5.1 TITLE			Chang	e Addition	
TITLE			5.1 NAME				_	
NAME	3100 W. BIG BEAVER			ET ADDRE	ess			
STREET ADDRESS			5.4 CITY-				<i>/</i>	
CITY-ST-ZIP	TROY MI	DELETE	6.1 TITLE		Accor and	Chang	ge Addition	
TITLE	AT	Anereie	6.2 NAME		ASSI, TREAS. THOMAS BAUMLIN	(and strong	- Light Internet	
NAME :	JOHNSOPN, M			: ET ADDRÉ	THOMAS BALIMILINI			
STREET ADDRESS	933 MACARTHUR BLVD.	•			933 MacADTUIN DIVID		İ	
CITY-ST-ZIP	MAHWAH NJ		6.4 CITY-	ST-ZIP	933 MacARTHUR BLVD., MAHWAH	NI OZAS		

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 in the 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, with all other like empowered.

SIGNATURE: