2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # 674739 MELDISCO K-M CLERMONT, FLA., INC. (4123) 1. Entity Name -26-2001 90132 026 ***150 00 Principal Place of Business Mailing Address 1002 E. HWY, 50 933 MACARTHUR BLVD CLERMONT FL 34711 MAHWAH NJ 07430 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 22-2312667 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES STREET STE. 105 TALLAHASSEE FL 32301 City 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 (NOTF: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIME ☐ Delete TITLE ☐ Change SHEPARD, JEFFREY A NAME NAME 933 MACARTHUR BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-71P MAHWAH NJ 07430 CITY-ST-Z!P TITLE ☐ Delete TITLE ☐ Change Addition PROFFITT, RANDALL S NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-7IP MAHWAH NJ 07430 CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change Addit.on RICHARDS, MAUREEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY - ST-ZIP TITLE ☐ Delete TITLE Change Addition GUINNESSEY, KATHLEEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CICY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition WOJNO, THOMAS MAME NAME 933 MACARTHUR BLVD. STREET ADORESS STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY-ST-ZIP AS TITLE ☐ Delete TITLE ☐ Change Adeltion **BAUMLIN, THOMAS** NAME NAMa STREET ADDRESS 933 MACARTHUR BLVD STREET ADDRESS CiTY-ST-7IP MAHWAH NJ 07430 CITY-ST-ZIP 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 **THOMAS WOJNO** APR 1 6 2001

CR2E034 (10/00)

(201) 934-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR