2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 26, 2001 8:00 am Secretary of State **DOCUMENT # 679565** MELDISCO K-M WINTER PARK, FLA., INC. (3062)04-26-2001 90298 041 ***150.00 Principal Place of Business Mailing Address 501 N. ORLANDO AVENUE 933 MACARTHUR BLVD WINTER PARK FL 32789 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 4. FEI Number Applied For 22-2312663 Not Applicable Ζiρ 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 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City Zio 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 (NOTE: 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) Wake Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE SHEPARD, JEFFREY A NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition PROFFITT, RANDALL S NAME NAME STREET ADDRESS 933 MACARTHUR BLVD. STREET ADDRESS CHY-ST-ZIP MAHWAH NJ 07430 CITY-ST-MP TITLE ☐ Delete TITLE ☐ Chanoe Addition RICHARDS, MAUREEN NAME NAME 933 MACARTHUR BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY-ST-7IP TiT: F ☐ Delete TITLE Addition BAUMLIN, THOMAS NAME NAME STREET ADDRESS 933 MACARTHUR BLVD STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY - ST- ZIP TIT! F Delete TITLE ☐ Change Addition GUINNESSEY, KATHLEEN NAME NAME STREET ADDRESS 933 MACARTHUR BLVD STREET AGDRESS CITY-ST-7IP MAHWAH NJ 07430 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 path; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as feedured by Chapter 80%. 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. (201) 934-2000 2001

Daytime Phone #