

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 696694 (9)
1. Corporation Name
MELDISCO K-M N.W. 2ND AVE., FLA., INC.
3203

Principal Place of Business
9903 MILITARY TRAIL
BOYNTON BCH. FL 33436
US

Mailing Address
933 MACARTHUR BLVD.
MAHWAH NJ 07430



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/30/1981	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 22-2364357	Applied For Not Applicable
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 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	85 Zip 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 and the date if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P SHEPARD, JEFFREY	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	933 MACARTHUR BLVD.	1.2 NAME	
STREET ADDRESS	MAHWAH NJ	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	V PROFFITT, RANDALL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	933 MACARTHUR BLVD.	2.2 NAME	
STREET ADDRESS	MAHWAH NJ	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	AT WOJNO, THOMAS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	933 MACARTHUR BLVD.	3.2 NAME	
STREET ADDRESS	MAHWAH NJ	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	S RICHARDS, MAUREEN	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	933 MACARTHUR BLVD	4.2 NAME	
STREET ADDRESS	MAHWAH NJ	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D PALIZZI, ANTHONY	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3100 W. BIG BEAVER	5.2 NAME	
STREET ADDRESS	TROY MI	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	AT MARK, MANORAR	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	933 MACARTHUR BLVD.	6.2 NAME	
STREET ADDRESS	MAHWAH NJ	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 that 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.

SIGNATURE:  THOMAS WOJNO APR 15 1998

CR2E034 (10/97)