PROFIT CORPORATION ANNUÁL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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

04-23-1999 90069 011 ***150.00

DOCUMENT # F88721

1. Corporation Name

MELDISCO K-M OLD TRAIL DR., FLA., INC.

#3284

						_{					
Principal Place	of Business	Mailing A	Mailing Address			, , , , , , , , , , , , , , , , , , , ,					
3701 TAMIAMI T	RAIL E.	•	933 MACARTHUR BLVD.								
NAPLES FL 3394	1 2	HAWHAM	MAHWAH NJ 07430					-			
US						DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed 06/28/1982					
2. Principal Pla	ace of Business	2a. Maili	2a. Mailing Address			4. FEI Number		Applied For			
21		26	26			22-2408892		Not Applicable			
Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
22 2						<u> </u>					
City & State		City	City & State			6. Election Campaign Financing		.00 May Be			
23		28	28			Trust Fund Contribution	Added to Fees				
Zip	Country	Zip	Zip Country			8. This corporation owes the current year in	tangible				
24	25	29	30			Personal Property Tax.	☐ Yes ☐ No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
UNITED STATES CORPORATION COMPANY					Name						
					82 Street Address (P.O. Box Number is Not Acceptable)						
1201 HAYS STREET					01.0017100141	55 (. 15. <u>–</u>					
SUITE 105			83	83							
TALL	AHASSEE FL 32301										
				84	City	FL	85	Zip Code			
				ᆜᆜ				no ite registered			
. 11. Pursuant t	to the provisions of Sections 607.	USU2 and 607.150	io, Fiorida Statutes, the a	DOME	-named corpor	ration submits this statement for the purpose o	internation	no registered			

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 (NOTE: Registered Apent strength when reinstation) DATE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS												
TITLE	P	DELETE	1.1 TITLE		Change	Addition						
NAME	SHEPARD, JEFFREY		1.2 NAME									
STREET ADDRESS	933 MACARTHUR BLVD.		1.3 STREET ADDRESS									
CITY-ST-ZIP	MAHWAH NJ		1.4 CITY-ST-ZIP									
TITLE	٧	DELETE	2.1 TITLE		Change	Addition						
NAME	PROFFITT, RANDALL S		2.2 NAME									
STREET ADDRESS	933 MACARTHUR BLVD.		2.3 STREET ADDRESS									
CITY-ST-ZIP	MAHWAH NJ		2.4 CITY-ST-ZIP									
TITLE	AT	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition						
NAME	Wojno, Thomas		3.2 NAME									
STREET ADDRESS	933 MACARTHUR BLVD.		3.3 STREET ADDRESS									
CITY-ST-ZIP	MAHWAH NJ		3.4. CITY-ST-ZIP									
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change	☐ Addition						
NAME	RICHARDS, MAUREEN		4. 2 NAME									
STREET ADDRESS	933 MACARTHUR BLVD		4.3 STREET ADDRESS									
CITY-ST-ZIP	MAHWAH NJ		4.4 CITY+ST-ZIP									
TITLE	D	DELETE	5.1 TITLE		Change	☐ Addition						
NAME	PALIZZI, ANTHONY		5.2 NAME									
STREET ADDRESS	3100 W. BIG BEAVER		5.3 STREET ADDRESS									
CITY-ST-ZIP	TROY MI		5.4 CITY-ST-ZIP	AAN GREEK		-/						
TITLE	AT	DELETE	6.1 TITLE	ASSI, TREAS.	Change	Addition						
NAME	JOHNSON, MARK		6.2 NAME	THOMAS BAUMLIN								
STREET ADDRESS	933 MACARTHUR BLVD.		6.3 STREET ADDRESS	933 MacARTHUR BLVD., MAHWAH, NJ	07430							
	MALIMAH MI		64 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, with all other like empowered.

SIGNATURE:

SIZE SUBSE CTHOM SASSI REAS.

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR BAUM IN

APR n : 1999

(201) 934-2600 (201) 934-2600

Daytime Phone #

R2E034 (11/98)