

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
 Sep 12 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000002661 (5)
 1. Corporation Name
MELITTA NORTH AMERICA, INC.



Principal Place of Business 17757 US HIGHWAY 19 N. STE. 600 CLEARWATER FL 34624	Mailing Address 17757 US HIGHWAY 19 N. STE. 600 CLEARWATER FL 34624
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 13925 58th St. N. Suite, Apt. #, etc.		2a. Mailing Address 26 13925 58th St. N. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/24/1996		3a. Date of Last Report 06/24/1996	
22 City & State 23 Clearwater, FL		27 City & State 28 Clearwater, FL		4. FEI Number 22-1732130		Applied For Not Applicable	
24 Zip 33760		25 Country USA		29 Zip 33760		30 Country USA	
9. Name and Address of Current Registered Agent POLEN, DAN B 17757 US HIGHWAY 19 N, STE. 600 CLEARWATER FL 34624				10. Name and Address of New Registered Agent 81 Name O'Keefe, Michael F. 82 Street Address (P.O. Box Number is Not Acceptable) 13925 58th St. N. 83 84 City Clearwater FL 85 Zip Code 33760			

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: *Michael F. O'Keefe* (NOTE: Registered Agent's signature required when reinstating) DATE: **9/3/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RADTKE, H. HELMUT 17757 US HIGHWAY 19 N, STE. 600 CLEARWATER FL 34624 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13925 58th St. N. Clearwater, Florida 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POLEN, DAN B 17757 US HIGHWAY 19 N, STE. 600 CLEARWATER FL 34624 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition T O'Keefe, Michael F. 13925 58th St. N. Clearwater, Florida 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MODZELEWSKI, MICHAEL 17757 US HIGHWAY 19 N, STE. 600 CLEARWATER FL 34624 <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13925 58th St. N. Clearwater, Florida 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOPP, H.D. MARIENSTRASSE 88 MINDEN, GERMANY 32425 <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V Matt Young 13925 58th St. N. Clearwater, Florida 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Robert Humphries 501 E. Kennedy Blvd., #1700 Tampa, FL

14. I do 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: *Michael F. O'Keefe* DATE: **9/3/97** 813-524-4831

CR2E034 (4/97)