

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

**FILED**  
**Apr 14 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F95000002661 (5)**  
 1. Corporation Name  
**MELITTA NORTH AMERICA, INC.**



Principal Place of Business <b>13925 58TH ST N                  CLEARWATER FL 33760                  US</b>	Mailing Address <b>13925 58TH ST N                  CLEARWATER FL 33760                  US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 13925 58th Street N.</b> Suite, Apt. #, etc		2a. Mailing Address <b>26 13925 58th Street N.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>06/24/1996</b>	
22. City & State <b>23 Clearwater, Florida</b>		27. City & State <b>28 Clearwater, Florida</b>		4. FEI Number <b>22-1732130</b>	
24. Zip <b>33760</b>		25. Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
29. Zip <b>33760</b>		30. Country <b>USA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Name and Address of Current Registered Agent <b>O'KEEFE, MICHAEL F                  13925 58TH ST N                  CLEARWATER FL 33760</b>				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>O'KEEFE, MICHAEL F                  13925 58TH ST N                  CLEARWATER FL 33760</b>				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: *Michael F. O'Keefe* DATE: **4-1-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP RADTKE, H. HELMUT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13925 58TH ST N	1.2 NAME	
STREET ADDRESS	CLEARWATER FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	Y O'KEEFE, MICHAEL F	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13925 58TH ST N	2.2 NAME	
STREET ADDRESS	CLEARWATER FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	S MODZELEWSKI, MICHAEL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13925 58TH ST N	3.2 NAME	
STREET ADDRESS	CLEARWATER FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	V YOUNG, MATT	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13925 58TH ST N	4.2 NAME	
STREET ADDRESS	CLEARWATER FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D HUMPHRIES, ROBERT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	501 E KENNEDY BLVD #1700	5.2 NAME	
STREET ADDRESS	TAMPA FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	AT
STREET ADDRESS		6.3 STREET ADDRESS	Beth Wohlwend
CITY-ST-ZIP		6.4 CITY-ST-ZIP	13925 58th Street N. Clearwater, Florida

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: *Michael F. O'Keefe* DATE: **4-1-98** TELEPHONE: **813-524-4930**

CR2E034 (10/97)