

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90057 047 \*\*\*150.00

**DOCUMENT # H80885**

1. Entity Name

**MELDISCO K-M CLEWISTON, FL., INC.** (3412)

Principal Place of Business

Mailing Address

955 SUGARLAND HWY.  
 CLEWISTON FL 33440

933 MACARTHUR BLVD  
 MAHWAH NJ 07430-2045  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **22-2649366**

Applied For  
 Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UNITED STATES CORPORATION COMPANY**  
**1201 HAYES STREET**  
**STE. 105**  
**TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip 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

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution.

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	SHEPARD, JEFFREY	933 MACARTHUR BLVD.	MAHWAH NJ	<input type="checkbox"/>	KATHLEEN GUINNESSY	933 MacARTHUR BLVD., MAHWAH, NJ 07430			<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	PROFFITT, RANDALL S	933 MACARTHUR BLVD.	MAHWAH NJ	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
AT	WOJNO, THOMAS	933 MACARTHUR BLVD.	MAHWAH NJ	<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	RICHARDS, MAUREEN	933 MACARTHUR BLVD.	MAHWAH NJ	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	PALIZZI, ANTHONY	3100 WW. BIG BEAVER	TROY MI	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
AT	BAUMLIN, THOMAS	933 MACARTHUR BLVD.	MAHWAH NJ 07430	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Kathleen Guinnesssey*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**KATHLEEN GUINNESSY**

**APR 18 2000**

**(201) 934-2000**

Date

Daytime Phone #

CEPENC4 (0/000)