## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (6)J06808 **DOCUMENT #** MELDISCO K-M 4346 OKEECHOBEE BLVD., FL., INC. Principal Place of Business Mailing Address 933 MAC ARTHUR BLVD 4346 OKEECHOBEE BLVD. MAHWAH NJ 07430 W. PALM BCH. FL 33401 3a. Date of Last Report 05/01/1995 or Qualified 03/31/1986 4. FEI Number 22-2698406 Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 23 8. This corporation has liability for intangible tax under s 199.032, Country 210 Ζip Florida Statutes Yes No

10. Name and Address of New Registered Agent 30 24 25 29 9. Name and Address of Current Registered Agent Name UNITED STATES CORPORATION COMPANY 82 Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET 83 SUITE 105 TALLAHASSEE FL 32301 Zip Code 85 84 City 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. Thereby accept the appointment as registered agent. I am , familiar with, and accept the obligations of Section 607.0506, Florida Statutes. SIGNATURE DATS Signature, typed or protect name of registered against and fromit apply uble (NOTE: Evolutioned Agent's greature required when reliability (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12 DELETE : 17/16 TITLE snepard, Seffrey CR2E034 ROBINSON, JOHN 1.2 NAME NAME 933 MACARTHUR BLVD. 1.3 STREET ADDRESS STREET ADDRESS MAHWAH NJ 1.4 CHY - ST - ZIP CITY - ST - ZIP Addition vst DELETE [ ] Change 2.11016 TITLE FALKOFF, MARTIN 2.2 NAME NAME 933 MACARTHUR BLVD. 2.3 STREET ADDRESS STREET ADDRESS MAHWAH NJ 2 4 CHY-ST-ZIP CITY-ST-ZIP Addition DELETE 3 ! TITLE TITLE woyno, Thomas WEINFUSS, STEWART 3.2 NAME NAME 933 MACARTHUR BLVD. 3.3 STREET ADDRESS STREET ADDRESS MAHWAH NJ 3 4 CITY - ST - ZIP CITY - ST - ZIP DELETE 4 1 TITLE TITLE KAKAR, MANOHAR 4 2 NAME NAME 933 MACARTHUR BLVD. 4.3 STREET ADDRESS STREET ADDRESS MAHWAH NJ 4.4 CITY - ST - ZIP City - ST - ZIP DELETE 5 1 TITLE TITLE FALKOFF, MARTIN 5.2 NAME NAME 933 MACARTHUR BLVD 300001808403 5.3 STREST ADDRESS STREET ADDRESS -05/06/96--01019--044 MAHWAH NJ 5.4 CITY - S! - 7i3 CITY-ST-ZIF \*\*\*200.00 ☐ Change DELETE 6 1 TITLE TITLE PALIZZI, ANTHONY 6.2 NAME NAME 3100 W.BIG BEAVER 6.3 STREET ADDRESS STREET ADDRESS TROY MI 6.4 O(1Y+S1+7)P CITY-ST-ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 one mattachment with an address. appears in Block 12 or Block 13 if changed, APR 1 6 1996 (201) 934-2000 SIGNATURE: SIGNATURE AND TYPED OR PHIL NAME OF SIGNING OFFICER OR DIRECTOR