2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

FILED **DOCUMENT # L96827** May 01, 2000 8:00 am Secretary of State 1. Entity Name MELDISCO K-M 7100 W. HWY. 98, FL., INC. 05-01-2000 90382 049 ***150.00 Principal Place of Business Mailing Address 933 MACARTHUR BLVD 7100 W HWY 98 PANAMA CITY FL 32405 MAHWAH NJ 07430-2045 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FFI Number 22-3078938 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UNITED STATES CORPORATION CO. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES ST SUITE 105 TALLAHASSEE FL 32301 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS CR2E034 (9/99) Addition ☐ Delete TITLE TITLE NAME SHEPARD JEFFREY. NAME 933 MacARTHUR BLVD., MAHWAH, NJ 07430 STREET ADDRESS STREET ADDRESS 933 MACARTHUR BLVD CITY-ST-ZIP CITY-ST-7/P MAHWAH NJ ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME PROFFITT, RANDALL S NAME STREET ADDRESS STREET ADDRESS 933 MACARTHUR BLVD CITY-ST-ZIP CITY-ST-ZIP MAHWAH NJ ☐ Change ☐ Addition TITLE NAME WOJNO, THOMAS STREET ADDRESS STREET ADDRESS 933 MACARTHUR BLVD CITY-ST-ZIP CITY-ST-ZIP Mahwah Nj Change Addition TITLE ☐ Delete NAME NAME BAUMLIN, THOMAS STREET ADDRESS STREET ADDRESS 933 MACARTHUR BLVD CITY-ST-ZIP CITY-ST-ZIP MAHWAH NJ 07430 Change Addition D Delete TITLE TITLE NAME NAME PALIZZI, ANTHONY STREET ADDRESS STREET ADDRESS 3100 W BIG BEAVER CITY-ST-ZIP CITY-ST-ZIP TROY MI Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME RICHARDS, MAUREEN STREET ADDRESS STREET ADDRESS 933 MAC ARTHUR BLVD CITY-ST-ZIP CITY-ST-ZIP MAHWAH NJ 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 (201) 934-2000