

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L96827

1. Entity Name

MELDISCO K-M 7100 W. HWY. 98, FL., INC. (3721)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90131 007 ***150.00

Principal Place of Business

7100 W HWY 98
PANAMA CITY FL 32405
US

Mailing Address

933 MACARTHUR BLVD
MAHWAH NJ 07430-2045

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 22-3078938

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 CO.
1201 HAYES ST
SUITE 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, 2001 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

PD
SHEPARD JEFFREY,
933 MACARTHUR BLVD
MAHWAH NJ

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
PROFFITT, RANDALL S
933 MACARTHUR BLVD
MAHWAH NJ

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

AT
GUINNESSY, KATHLEEN
933 MACARTHUR BLVD
MAHWAH NJ 07430

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

AT
BAUMLIN, THOMAS
933 MACARTHUR BLVD
MAHWAH NJ 07430

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STREET ADDRESS
CITY-ST-ZIP

S
RICHARDS, MAUREEN
933 MAC ARTHUR BLVD
MAHWAH NJ

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS WOJNO

APR 16 2001

Date

(201) 934-2000

Daytime Phone #

CR2E034 (10/00)