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2005 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED AND FILED

05 MAY 23 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



②
04-05

DOCUMENT # P02000106612 1. Entity Name MELDISCO - BUR 7303 DADELAND MALL, FL., INC.					
Principal Place of Business ONE CROSFIELD AVENUE WEST NYACK, NY 10994			Mailing Address ONE CROSFIELD AVENUE WEST NYACK, NY 10994		
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 42-1558757	Applied For Not Applicable
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SHEPARD, JEFFREY A		NAME	400055833034	
STREET ADDRESS	933 MACARTHUR BLVD		STREET ADDRESS	06/06/05--01064--009 **300.00	
CITY-ST-ZIP	MAHWAH, NJ 07430		CITY-ST-ZIP		
TITLE	SVP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HILLS, MICHAEL		NAME		
STREET ADDRESS	933 MACARTHUR BLVD		STREET ADDRESS		
CITY-ST-ZIP	MAHWAH, NJ 07430		CITY-ST-ZIP		
TITLE	SVP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PROFFITT, RANDALL S		NAME		
STREET ADDRESS	933 MACARTHUR BLVD		STREET ADDRESS		
CITY-ST-ZIP	MAHWAH, NJ 07430		CITY-ST-ZIP		
TITLE	SVP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	RAVENER, ROBERT		NAME	VICE PRESIDENT	
STREET ADDRESS	933 MACARTHUR BLVD		STREET ADDRESS	Timothy Garahan	
CITY-ST-ZIP	MAHWAH, NJ 07430		CITY-ST-ZIP	67 MILLEROCK ST., WORCESTER, MA 01608	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:			TIMOTHY GARAHAN		VICE PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #
			MAY - 4 2005		