FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P35725** **(1)**

1. Corporate Name

MELRU CORPORATION

Principal Place of Business

CORAL ISLE FACTORY STORES
7222 ISLE CAPRI RD #62
NAPLES FL 33961
US

Mailing Address

250 RITTENHOUSE CIRCLE
KEYSTONE PARK
BRISTOL PA 19007
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/25/1991**

3a. Date of Last Report: **05/27/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

4. FEI Number: **23-2256563** ☐ Applied For ☐ Not Applicable

Suite, Apt. # etc. — 22

Suite, Apt. # etc. — 27

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23

City & State — 28

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24 Country — 25

Zip — 29 Country — 30

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE(S)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '12
Title	CEO	☐ Change ☐ Addition
Name	KIMMEL, SIDNEY	
Address	191 N. PRESIDENTIAL BLVD	
City-St-Zip	BALA CYNWYD PA	
Title	VPS	☐ Change ☐ Addition
Name	GOODFRIEND, HERBERT J.	
Address	179 E. 70TH STREET	
City-St-Zip	NEW YORK NY	
Title	P	☐ Change ☐ Addition
Name	BUERKLE, HOWARD A.	
Address	63 HERING ROAD	
City-St-Zip	MONTVALE NJ	
Title	VPT	☐ Change ☐ Addition
Name	CARD, WESLEY	
Address	263 NOD HILL ROAD	
City-St-Zip	WILTON CT	
Title		☐ Change ☐ Addition
Name		
Address		
City-St-Zip		
Title		☐ Change ☐ Addition
Name		
Address		
City-St-Zip		

14. I hereby certify that the information supplied with this filing is absolutely furnished and true, and 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 a director or officer 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 with an address.

SIGNATURE: Cyndee Todd Asst. Vice President 4-28-95 (813) 785-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date — Daytime Phone #

0397032 FP

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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED

DOCUMENT # P36232 (7)

1. Corporate Name

KEELBOAT CONCEPTS INCORPORATED

Principal Place of Business	Mailing Address
196 ROLING HILL DR. DAPHNE AL 36526 US	196 ROLLING HILL DR. DAPHNE AL 36526 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/06/1991	3a. Date of Last Report: 05/01/1994
4. FEI Number: 63-1054417	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☒ No	

2. Principal Office Address — 21 Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25

2a. Mailing Address 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~PTD~~	1 TITLE	PVTD ☒ Change ☐ Addition
NAME	RICKELS, FRANK MICHAEL	1 NAME	
STREET ADDRESS	~~4815 HALLS MILL ROAD~~	1 STREET ADDRESS	196 ROLLING HILL DRIVE
CITY-ST-ZIP	MOBILE AL	1 CITY-ST-ZIP	DAPHNE, AL 36526
TITLE	~~VSD~~	2 TITLE	SD ☒ Change ☐ Addition
NAME	~~BONNER, JOSEPH C.~~	2 NAME	KIMBERLI A. RICKELS
STREET ADDRESS	~~4815 HALLS MILL ROAD~~	2 STREET ADDRESS	196 ROLLING HILL DRIVE
CITY-ST-ZIP	~~MOBILE AL~~	2 CITY-ST-ZIP	DAPHNE, AL 36526
TITLE	D	3 TITLE	DIRECTOR ☒ Change ☐ Addition
NAME	BISHOP, E. EUGENE	3 NAME	
STREET ADDRESS	~~4815 HALLS MILL ROAD~~	3 STREET ADDRESS	4721 MORRIMON DR.
CITY-ST-ZIP	~~MOBILE AL~~	3 CITY-ST-ZIP	MOBILE, AL 36625
TITLE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(i), 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 on an attachment with an address.

SIGNATURE: [signature] 5/1/95 (334) 626-2322

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — F. MICHAEL RICKELS — DATE — DAYTIME PHONE #

0471837 FP