

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90046 002 ***150.00

DOCUMENT # P35725

1. Entity Name

MELRU CORPORATION

Principal Place of Business

**180 RITTENHOUSE CIRCLE
KEYSTONE PARK
BRISTOL PA, 19007
US**

Mailing Address

**180 RITTENHOUSE CIRCLE
KEYSTONE PARK
BRISTOL PA 19007
US**

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

23-2256563

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

**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.

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, 2002 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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DANSKY, IRA M. 115 DUNDEE DRIVE STAMFORD CT 06903	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DONNALLEY, JOSEPH T 1837 THORNBURG DRIVE MAPLE GLEN PA 19002	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUERKLE, HOWARD A. 412 JEFFRIES AVE BLACK HAVEN NJ 08008	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD CARD, WESLEY R 3 FORTRESS CT PRINCETON NJ 08540	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FARRELL, PATRICK M. 1420 BARTON DR FT WASHINGTON PA 19034	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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)(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, with all other like empowered.**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph T. Donnalley 4-24-02 215-785-4600

Date

Daytime Phone #

CR2E034 (9/01)