FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90068 012 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000041053

1. Corporation Name

Principal Place of Business

1280 PALM COAST HWY SW

MELDISCO K-M PALM COAST, FL., INC. \$4042

Mailing Address 933 MACARTHUR BLVD

PALM COAST FL 32137		MAHWAH NJ 07430 US				DO NOT WRITE IN THIS SPACE				
US		US			3. D	ate Incorporated or Qualifed				
						6/10/1993				
2 Principal Pla	ace of Business	2a. Mailing Address				El Number		Ap	olied For	
21	acc of Edsilloss	26			2	2-3260435		_ 	Applicable	
Suite, Apt. 7	#. etc.	Suite, Apt. #, etc.						\$8.75	dditional	
22	.,, 5.5.	27			5. C	ertifcate of Status Desired		Fee Re		
City & State		City & State			6. E	lection Campaign Financing		\$5.00	May Be	
23		28			I	rust Fund Contribution		Added t	, ,	
Zip	Country	Zip	Countr	у	8. T	his corporation owes the curre	ent year Intan	gible		
24	25	29 30			P	ersonal Property Tax.		ŬYes _	□No	
	9. Name and Address of Current		i		10. N	lame and Address of New R	legistered Ag	gent		
			8	1 Name					1	
UNITED STATES CORPORATION COMPANY				82 Street Address (P.O. Box Number is Not Acceptable)						
1201 HAYES ST			6	52 Street Address (P.O. Box Number is Not Acceptable)						
SUITE	E 105		8:	3						
TALL	AHASSEE FL 32301							 	2012	
			84	4 City			FL	85 Zip (oge	
11 Pursuant t	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the abo	ve-named	corporation s	submits this statement for the	purpose of ch	nanging its	registered	
office or re	enistered agent, or both, in the State of	f Florida. Such change was auth	orized b	v the corpo	oration's boar	rd of directors. I hereby accep	t the appoint	ment as re	gistered	
agent. I ar	m familiar with, and accept the obligation	ons of, Section 607.0505, Fibrida	Statute	·S.					1	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	aistered Ag	ent signature n	equired when rein	stating)	DATE			
12.	OFFICERS AND		13.			DITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE					Change	☐ Addition	
NAME	SHEPARD, JEFFREY			1.2 NAME						
STREET ADDRESS	933 MACARTHUR BLVD			1.3 STREET ADDRESS						
CITY-ST-ZIP	MAHWAH NJ		1.4 CITY-ST-ZIP		}					
TITLE	V	☐ DELETE	2.1 TITLE		<u> </u>	· · ·		Change	☐ Addition	
NAME	PROFFITT, RANDALL S		2.2 NAME							
STREET ADDRESS	33 MACARTHUR BLVD		2.3 STREET ADDRESS							
CITY-ST-ZIP	MAHWAH NJ		2.4 CITY-ST-ZIP							
TITLE	··· · · · · · · · · · · · · · · · · ·		3.1 TITLE					Change	Addition	
NAME	WOJNO, THOMAS		3.2 NAME							
STREET ADDRESS	933 MACARTHUR BLVD		3.3 STREET ADDRESS		}				Ł	
	MAHWAH NJ		3.4. CITY-ST-ZIP							
CITY-ST-ZIP TITLE			4.1 TITLE		ACCI	REAS.		Change	ddition	
NAME	N1		4,2 NAME		MOOF	· /REAS.				
STREET ADDRESS			4.3 STREET ADDRESS		THOM	AS BAUMLIN				
			4.4 CITY-ST-ZIP		033 Mac	ARTHUR BLVD., MAH	MATALLE NEE	N7/120		
CITY-ST-ZIP TITLE	D	☐ DELETE	5.1 TITLE		JJJ IIIac	MINITURE DEVO, MICH	144-114-114-1	Change	☐ Addition	
NAME	PALIZZI, ANTHONY	_	5.2 NAME							
STREET ADDRESS	3100 W BIG BEAVER		5.3 STRE	ET ADDRESS						
	TROY MI		5.4 CITY-	ST-ZIP					ļ	
CITY-ST-ZIP TITLE	S	☐ DELETE	6.1 TITLE			<u> </u>		☐ Change	☐ Addition	
NAME	RICHARDS, MAUREEN	_	6.2 NAME	į						
STREET ADDRESS	933 MAC ARTHUR BLVD		6.3 STRE	ET ADDRESS	Į.					
J	MAHWAH NJ	į	6.4 CITY-						,	
CITY-\$T-ZIP	ertify that the information supplied with	this filing does not qualify for th	e exemp	tion stated	d in Section 1	19.07(3)(i), Florida Statutes.	I further certif	y that the i	nformation	
indicated (on this annual report or supplemental director of the corporation or the receive	annual report is true and accurat	e and th	at mv sign	nature shall ha	ave the same legal effect as II	i mage under	oatn; tnat	am an	
Block 12 d	or Block 13 if changed, or on an attach	ment with an address, with all of	ner like	BUJO PALE	ŁIN	A .				
	elet.	The Logarition)/\C\\\	-	APR of a	(20)	934	2000	
SIGNAT	URE:	PRINTED NAME OF SIGNING OFFICER OR	DIPECTO		TREAS.	Date 190	1 <u>9</u>	tme Phone #	<u> </u>	