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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P94000016585**1. Corporation Name

MELDISCO K-M 10501 PINES BLVD., FL., INC.

\$4120

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

04-23-1999 90067 049 \*\*\*150.00



Principal Place	e of Business	Mailing Address				) 11 EIO \$11 St	111.67 10101 0111 1801		
10501 PINES BLVD. 933 MACARTHUR BLVD									
PEMBROKE PINES FL 33026 MAHWAH NJ 07430					- DO NOT WRITE IN THI	DO NOT WRITE IN THIS SPACE			
US					3. Date Incorporated or Qualifed				
					03/02/1994				
2 Principal P	ace of Business	2a. Mailing Address			4. FEI Number		Applied For		
21	333 5. 5 -5335	26			22-3286686		Not Applicable		
Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.7	5 Additional		
22		27			5. Certificate of Status Desired	Fee	Required <sup>1</sup>		
City & State		City & State		6. Election Campaign Financing	\$5.0	<b>)0</b> May Be			
23		28		Trust Fund Contribution Added to Fees					
Zip			Country	/	8. This corporation owes the current year Intangible Personal Property Tax.  Yes No				
24	[25]	<del></del>	30		Personal Property Tax.  10. Name and Address of New Registered	☐ Yes			
Name and Address of Current Registered Agent					81 Name				
UNITED STATES CORPORATION COMPANY									
1201 HAYS ST.			82	Street	Address (P.O. Box Number is Not Acceptable)		İ		
SUITE 105			83	<del> </del>					
	AHASSEE FL 32301								
}			84	City	FI	85 2	ip Code		
44. Duranged to the explicions of Sections 607 0502 and 607 1508. Florida Statutes the above-named comporation submits this statement for the purpose of changing its registers									
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
12.	OFFICERS AND DIRECTORS 13.		13.		ADDITIONS/CHANGES TO OFFICERS A				
TITLE	PD	☐ DELETE	1.1 TITLE			Chang	ge 📑 Addition		
NAME	SHEPARD, JEFFREY A		1.2 NAME				Ì		
STREET ADDRESS			1.3 STREET ADDRESS						
CITY-ST-ZIP			1.4 CITY-5	T-ZIP			<b>F 8</b>		
TITLE	D	☐ DELETE	2.1 TITLE			☐ Chan	ge 🗌 Addition		
NAME	PALIZZI, ANTHONY		2.2 NAME		•				
STREET ADDRESS	3100 W BIG BEAVER		2.3 STREE	T ADORESS			}		
CITY-ST-ZIP	TROY MI 48084	<u> </u>	2. 4 CITY-	ST-ZIP		☐ Chan	ge Addition		
TITLE	VAS	☐ DELETE	3.1 TITLE		·	L.J Chan	ge		
NAME	PROFFITT, RANDALL S		3.2 NAME				ł		
STREET ADDRESS	933 MACARTHUR BOULEVARD			TADDRESS					
CITY-ST-ZIP	MAHWAH NJ 07430	☐ DCI ETE	3.4. CITY-	ST-ZIP		[] Chan	ge Addition		
TITLE	S NOUVADOS MALIDEEN	☐ DELETÉ	4.1 TITLE				ac Clyaquiqui		
NAME	RICHARDS, MAUREEN		4, 2 NAME				Ţ		
STREET ADDRESS		,	1	TADDRESS		,	. /		
CITY-ST-ZIP	MAHWAH NJ 07430	DODE: ETE	4.4 CITY-5	ST-ZIP	Acces (FD man)	Chan	ge Addition		
TITLE	AT MARK	DELETE	5.1 TITLE 5.2 NAME		ASSI. TREAS.	LL CHAIL	90 FB\\190(00)		
NAME	JOHNSON, MARK		4	TADORESS	THOMAS BAUMLIN				
STREET ADDRESS	933 MACARTHUR BOULEVARD		5.4 CiTY-5		933 MacARTHUR BLVD., MAHWAH, N	II 07/12r	,		
CITY-ST-ZIP	MAHWAH NJ 07430	DELETE	6.1 TITLE	21-ZIF	The modernon better material, i	Chan			
TITLE	AT THOMAS	☐ hereis	6.2 NAME	į			a		
NAME .	WOJNO, THOMAS			TADDRESS			-		
STREET ADDRESS	933 MACARTHUR BOULEVARD		6.3 STREE						
CITY-ST-ZIP	MAHWAH NJ 07430		0.4 CHT-3	11- ZIP	Lin Contine 140 07/2\/i) Florido Statutos I furthes o				

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 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, with all other like empowered.

SIGNATURE:

APR 0 1 1999

(201) 934-2000