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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P9400065198 (1)**

MELDISCO K-M 3800 OAKWOOD BLVD., FL., INC. Principal Place of Business Mailing Address 3800 OAKWOOD BLVD. 3800 OAKWOOD BLVD. HOLLYWOOD FL 33020-7114 HOLLYWOOD FL 33022 3. Date Incorporated or Qualified 3a. Date of Last Report 09/06/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 933 Macarthur Blud 22-3327094 21 Not Applicable Suite, Apt. #, etc. Suite Ant. #. etc \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 710 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 25 29 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A UNITED STATES CORPORATION COMPANY 1201 HAY ST. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 84 City Zip Code **B**5 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Styriature, hyperd or printed name of registered agent and title it appricable (NOTE Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 96/6) (6) THE DELETE 1.1 TITLE ☐ Change ■ Addition ROBINSON, JOHN M. 1.2 NAME NAME CR2E034 933 MACARTHUR BLVD SUBLET ADDRESS 1.3 STREET ADDRESS MAHWAH NJ CITY-ST ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE FOLKOFF, MARTIN NAME 2.2 NAME 933 MACARTHUR BLVD 23 STREET ADDRESS STREET ADORESS MAHWAH NJ 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change THE 3.1 TITLE Addition WOJNO, THOMAS 933 MACARTHUR BLVD STREET ADDRESS 3.3 STREET ADDRESS MAHWAH NJ CITY - ST- ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE PALIZZI. ANTHONY 4.2 NAME NAME 933 MACARTHUR BLVD STREET AUDRESS 4.3 STREET ADDRESS MAHWAH NJ 4.4 CITY-ST-ZIP CITY - S1 - ZiP DELETE Change Addition HILE 5.1 TITLE KAKAR, MANOHAR 5.2 NAME NAM8 933 MACARTHUR BLVD STREET ADDRESS **5.3 STREET ADDRESS** MAHWAH NJ 5.4 CITY-ST-ZIP CHY-SI-ZIP DELETE Change Addition THEF 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS 64 CITY-ST-ZIP 14. I do 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

SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an at

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR

himent with an address.

Date

Davlime Phone #

FILED

May 15 1997 8:00am

Secretary of State

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