

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 # 805422

(3)

1. Corporation Name
SAKS & COMPANY

Principal Place of Business
555 TUCKAHOE ROAD
YONKERS NY 10710

Mailing Address
555 TUCKAHOE ROAD
YONKERS NY 10710-5709

FILED
May 15 1997 8:00am
Secretary of State



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/24/1941		3a. Date of Last Report 04/10/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 13-1256625		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S.PINE ISLAND RD. 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 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

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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CD	NAME	MILLER, PHILIP	1.1 TITLE		1.2 NAME	
STREET ADDRESS	12 E 49TH ST.		NEW YORK NY	1.3 STREET ADDRESS		1.4 CITY - ST - ZIP	
CITY - ST - ZIP				2.1 TITLE		2.2 NAME	
TITLE	V	NAME	KREY, J.F.	2.3 STREET ADDRESS		2.4 CITY - ST - ZIP	
STREET ADDRESS	12 E 49TH ST.		NEW YORK NY	3.1 TITLE		3.2 NAME	RICHARD F. ZANNING
CITY - ST - ZIP				3.3 STREET ADDRESS		3.4 CITY - ST - ZIP	
TITLE	VT	NAME	ZARRINO, RICHARD	4.1 TITLE		4.2 NAME	
STREET ADDRESS	12 E 49TH STREET		NEW YORK NY	4.3 STREET ADDRESS		4.4 CITY - ST - ZIP	
CITY - ST - ZIP				5.1 TITLE		5.2 NAME	VAS
TITLE	VAS	NAME	SUGLIA, VICTOR	5.3 STREET ADDRESS		5.4 CITY - ST - ZIP	Alexandra M. Notaras
STREET ADDRESS	555 TUCKAHOE RD.		NEW YORK NY 10710	6.1 TITLE		6.2 NAME	12 E 49th Street
CITY - ST - ZIP				6.3 STREET ADDRESS		6.4 CITY - ST - ZIP	New York, NY 10017
TITLE	VAS	NAME	QUINTIN, S.A.				
STREET ADDRESS	12 E. 49TH STREET		NEW YORK NY				
CITY - ST - ZIP							
TITLE		NAME					
STREET ADDRESS							
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 registered agent or both, and that I am empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or in an attachment with an address.

SIGNATURE:

[Handwritten Signature]

U. 24 97

914. 771. 31. 55

CR2E034 (9/96)