

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 AM 8:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F29364** (9)

1. Corporation Name
MARSHALLS OF WEST PALM BEACH, FL., INC. 149

Principal Place of Business
**300 BRICKSTONE SQUARE
C/O TAX DEPT.
ANDOVER MA 01810**

Mailing Address
**300 BRICKSTONE SQUARE
C/O TAX DEPT.
ANDOVER MA 01810**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/13/1981

3a. Date of Last Report
03/23/1994

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

24. Zip

4. FEI Number
04-2724345

Applied For
 Applied For
 Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301**

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	T
NAME	COHEN, IRWIN
STREET ADDRESS	200 BRICKSTONE SQUARE
CITY - ST - ZIP	ANDOVER MA
TITLE	VPS
NAME	AMBRO, J. G
STREET ADDRESS	200 BRICKSTONE SQUARE
CITY - ST - ZIP	ANDOVER MA
TITLE	PCO
NAME	ROSSI, JERRY
STREET ADDRESS	200 BRICKSTONE SQUARE
CITY - ST - ZIP	ANDOVER MA
TITLE	D
NAME	GOLDSTEIN, STANLEY
STREET ADDRESS	ONE THEALL ROAD
CITY - ST - ZIP	RYE NY
TITLE	D
NAME	FRIEDHEIM, MICHAEL
STREET ADDRESS	ONE THEALL ROAD
CITY - ST - ZIP	RYE NY
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	PTD
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	DELETED
6.3 STREET ADDRESS	WARREN FEIDBERG
6.4 CITY - ST - ZIP	200 BRICK STONE SQ. ANDOVER, MA 01810

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-95
DATE

508-4747885
TELEPHONE #