

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90380 029 ***150.00

DOCUMENT # F94000003528
1. Entity Name
AUTHENTIC FITNESS RETAIL INC.

Principal Place of Business
ATTN: FINANCE/TAX
6040 BANDINI BLVD
CITY OF COMMERCE CA 90040
US

Mailing Address
CORPORATE CAMPUS I
470 WHEELER'S FARMS RD
MILFORD CT 06460
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

4. FEI Number
95-4442062
 Applied For
 Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State
10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	VP	NAME	SILVERSTEIN, STANLEY P	TITLE	PSD	NAME	Stanley P. Silverstein
STREET ADDRESS	90 PARK AVENUE	CITY-ST-ZIP	NEW YORK NY 10016	STREET ADDRESS	90 Park Avenue, 26th Floor	CITY-ST-ZIP	New York, NY 10016
TITLE	VP	NAME	MCHUGH, MICHAEL P	TITLE	VPTD	NAME	James P. Fogarty
STREET ADDRESS	6040 BANDINI BLVD	CITY-ST-ZIP	COMMERCE CA 90040	STREET ADDRESS	90 Park Avenue, 26th Floor	CITY-ST-ZIP	New York, NY 10016
TITLE	CD	NAME	WACHNER, LINDA	TITLE	VPD	NAME	Douglas P. Rosefsky
STREET ADDRESS	90 PARK AVE	CITY-ST-ZIP	NEW YORK NY 10016	STREET ADDRESS	90 Park Avenue, 26th Floor	CITY-ST-ZIP	New York, NY 10016
TITLE	D	NAME	WILLIAM S FINKELSTEIN	TITLE	VP	NAME	Roger Williams
STREET ADDRESS	90 PARK AVE	CITY-ST-ZIP	NEW YORK NY 10016	STREET ADDRESS	6040 Bandini Blvd.	CITY-ST-ZIP	City of Commerce, CA 90040
TITLE		NAME		TITLE		NAME	
STREET ADDRESS		CITY-ST-ZIP		STREET ADDRESS		CITY-ST-ZIP	
TITLE		NAME		TITLE		NAME	
STREET ADDRESS		CITY-ST-ZIP		STREET ADDRESS		CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **Stanley P. Silverstein** **4/17/02** **203-301-7376**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)