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FILED
Jun 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000004705 (8)
 Corporation Name
CASUAL CORNER GROUP, INC.



Principal Place of Business 100 PHOENIX AVENUE ENFIELD CT 06083-1700	Mailing Address 100 PHOENIX AVENUE ENFIELD CT 06082-4470
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3. Date Incorporated or Qualified 09/27/1995	3a. Date of Last Report 07/09/1996
4. FEI Number 51-0368883	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 Zip	29 Zip
25 Country	30 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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

TITLE	CEOD	<input type="checkbox"/> DELETE
NAME	VECCHIO, LEONARDO D	
STREET ADDRESS	100 PHOENIX AVENUE	
CITY-ST-ZIP	ENFIELD CT	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	VECCHIO, CLAUDIO D	
STREET ADDRESS	100 PHOENIX AVENUE	
CITY-ST-ZIP	ENFIELD CT	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	CHEMELLO, ROBERTO	
STREET ADDRESS	100 PHOENIX AVENUE	
CITY-ST-ZIP	ENFIELD CT	
TITLE	SO	<input type="checkbox"/> DELETE
NAME	BELLI, SUSI	
STREET ADDRESS	100 PHOENIX AVENUE	
CITY-ST-ZIP	ENFIELD CT	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	LEONARDO DELVECCHIO	
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PRESIDENT & CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	CLAUDIO DELVECCHIO	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
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	CFO.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	LUCIANO SANTEL	
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (9/96)