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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600004602 (6)

MARSHALLS OF MA, INC.

Principal Place of Business

Suite. Apt. #, etc.   Scritificate of Status Desired   \$8.75 Addition   Fee Required   Fee Requir	770 COCHITUAT		770 COCHITUATE RD. Framingham ma 01701-4698					
22   Sulle, Apt. #, etc.   Sulle, Apt. #, et						•	3a. Date of Last Report	
Suite, Apt #, etc   Suite, Apt #, etc   Suite, Apt #, etc   Size   Suite   Size   State   Size   Siz	2. Principal Fl	lace of Business	2a. Mailing Address			1	Applied Fo	
City & State  Country  Added to Fees  Added to Fees  Added to Fees  Added to Fees  No Florida Statutes  Pyes No No Plorida Statutes  No Florida Statutes  No					<del></del>	04-2261984	Not Applic	
City & State    City & State   Country   28   Country   29   Country   29   39   30   Find Contribution   Added to Find Statutes   Country   29   39   30   Find Statutes   Country   29   29   29   29   29   29   29   2		#, etc	<del> </del>		5. Certificate of Status Desired		al	
Zip	City & State	e	ê '				\$5.00 May Be	
9. Name and Address of Current Registered Agent  THE UNITED STATES CORPORATION COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525  82 Street Address (P.O. Box Number is Not Acceptable)  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 regist office of 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 registed agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  State Agent and Address of New Registered Agent.  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 registed agent and familiar with and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registed agent and familiar with and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registed agent and familiar with and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registed agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registed agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist of the purpos		Country	Zip	Country				32.
THE UNITED STATES CORPORATION COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525  82 Street Address (P.O. Box Number is Not Acceptable)  83 E4 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 regist office or registreed 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 registe agent and familiar in the final registeration of the purpose of changing its registeration and the final registeration of the purpose of changing its registeration and the final registeration of the purpose of changing its registeration and the final registeration and the final registeration of the purpose of changing its registeration and the final registeration and the corporation's board of directors. I hereby accept the dependent and registeration and the final registeration and the final registeration and the final registeration and registeration and registeration and registeration and registerati	24			30				
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TALLAHASSEE FL 32301-2525  B3  B4 City FL B5 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 regist of the 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 registed agent are familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICE RS AND DIRECTORS  12. OFFICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PD			N COMPANY	81	Name			
B8   City   FL   B5   Zip Code				82	Street Address (P.O. Box Number is Not Acceptable)			
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12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILE PD	SIGNATURE	, ,				equited when reinstation)	DATE	
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NAME   LESSER, RICHARD   12 NAME   13 STREET ADDRESS   14 CITY-ST-ZIP					·····			ddition
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CITY S1-7IP   FRAMINGHAM MA 01701   1.4 CITY-ST-ZIP     Change   Address   APPEL, ALFRED   2.3 STREET ADDRESS   CITY S1-7IP   FRAMINGHAM MA 01701   2.4 CITY-S1-ZIP   Change   Address   ACITY-S1-ZIP				1.3 STREET	ADORESS			
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PDANIMOUAN MA 04704	STREET ADDRESS			3.3 STREET	ADDRESS			
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	UELE		DELETE	5.1 TITLE	Î		Change ☐ Ad	ddition
NAME CAMPBELL, DONALD 52 NAME	NAME			5.2 NAME	1			
STREET ADDRESS 770 COCHITUATE RD. 5.3 STREET ADDRESS	STREET ADDRESS			5.3 STREET	ADDRESS			
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NAME CAMMARATA, BERNARD 62 NAME	NAME	•		62 NAME				
STREET ADDRESS 770 COCHITUATE RD. 63 STREET ADDRESS	STREET ADORESS			6.3 STREET	ADDRESS			
CIDY-ST-2/F FRAMINGHAM MA 01701 64 CiTY-ST-2/P								
14. I do be only 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 oat 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 Brack 12 or Block 13 if changed, or on an attachment with an address.	informatio Lani an ol	on indicated on this armual report or softicer or director of the corporation of	supplemental annual report is t r the receiver or trustee empow	true and acc vered to exec	urate and	that my signature shall have the same leg-	al effect as if made under oath	h; that

**SIGNATURE:** 

**FILED** 

Feb 20 1997 8:00am

Secretary of State