

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 MAY -1 11 18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M94023** (2)
1. Corporation Name
SUPER KIDS BARGAIN STORE, INC.

Principal Place of Business: **118-120 N MIAMI AVE MIAMI FL 33128-1826 US**
Mailing Address: **118-120 N MIAMI AVE MIAMI FL 33128-1826 US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **08/12/1988** 3a. Date of Last Report: **03/16/1994**
4. FEI Number: **65-0071453** 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 § 199.032, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent: **GINZBURG, SAUL 7901 BISCAYNE PT. CIR. MIAMI BEACH FL 33141**
10. Name and Address of New Registered Agent:
81 Name: _____
82 Street Address (P.O. Box Number is Not Acceptable): _____
83 _____
84 City: _____ 85 Zip Code: **FL**

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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DT	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GINZBURG, SAUL	12. NAME	
STREET ADDRESS	7901 BISCAYNE PT. CIRCLE	13. STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	14. CITY - ST - ZIP	
TITLE	SD	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GINZBURG, BERTHA	22. NAME	
STREET ADDRESS	7901 BISCAYNE PT. CIRCLE	23. STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	24. CITY - ST - ZIP	
TITLE	DP	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANNON, JACK	32. NAME	
STREET ADDRESS	1875 NE 208 TERR	33. STREET ADDRESS	
CITY - ST - ZIP	N MIAMI BCH FL	34. CITY - ST - ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY - ST - ZIP		44. CITY - ST - ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY - ST - ZIP		54. CITY - ST - ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY - ST - ZIP		64. CITY - ST - ZIP	

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)(k), 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 any attachment with an address.

SIGNATURE: *Bertha Ginzburg* **BERTHA GINZBURG APRIL 25, 1995** (905) 312-3751
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (SEE INSTRUCTIONS)