

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000038967

Entity Name: LINENS AND BEYOND, INC

FILED  
Jun 21, 2006  
Secretary of State

**Current Principal Place of Business:**

16495 NW 49TH AVE  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

16495 NW 49TH AVE  
HIALEAH, FL 33014

**New Mailing Address:**

FEI Number: 80-0099993

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EL CHURAF A, CHARIF  
1866 NW 20 ST | | |  
MIAMI, FL 33142 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: EL CHURAF A, CHARIF  
Address: 1866 NW 20 ST  
City-St-Zip: MIAMI, FL 33142

Title: V ( ) Delete  
Name: BALKIS, HISHAM  
Address: 8277 NW ND MNR  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARIF EL CHURAF A

P

06/21/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date