

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

PROFIT CORPORATION ANNUAL REPORT 1996 *5-1-96*



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

DOCUMENT # **P39453 (6)**
1. Corporation Name
TIFFANY FACTORY OUTLET, INC.



Principal Place of Business: **12801 W SUNRISE BLVD #960 SUNRISE FL 33323 US**
Mailing Address: **334 E FIRST ST PO BOX 195 GENOA IL 60135 US**

3. Date Incorporated or Qualified: **06/23/1992**
3a. Date of Last Report: **08/07/1995**
4. FET Number: **36-3776290**
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 s. 199.032, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent
**JANICKI, JANET
2472 NW 107TH AVE.
SUNRISE FL 33322**

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: *Janet Janicki* **Janet Janicki** **5/14/96**
Name typed or printed name of registered agent and the date of filing: _____
Name typed or printed name of new registered agent and the date of filing: _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	CLARK, JAMES V.	
STREET ADDRESS	15W103 CONCORD	
CITY-ST-ZIP	ELMHURST IL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CLARK, JEFFREY C.	
STREET ADDRESS	135 MAIN	
CITY-ST-ZIP	GENOA IL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	D'AURIA, NORMAN	
STREET ADDRESS	1314 CHATHAM	
CITY-ST-ZIP	WOODSTOCK IL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	D AURIA, DEREK	
STREET ADDRESS	1314 CHATHAM	
CITY-ST-ZIP	WOODSTOCK IL	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 manager 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 unchanged, or in an attachment with an address.

SIGNATURE: *Derek D'Auria* **Derek D'Auria** **5/14/96** **815-784-5551**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: _____
DATE: _____

CR2E034 (12/95)