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

**PROFIT CORPORATION** ANNUAL REPORT 1999

**DOCUMENT #** 1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90150 031 \*\*\*150.00

IHVING E	BERLIN CASUALS, INC.							
Principal Place	e of Business	Mailing Address				ilo 1191 8191: Ojeti 0101	#1811 BIBN BIBN 1881	
IRVING BERLIN	•	IRVING BERLIN					`_	
1919 HOLLYWOOD BLVD. 1919 HOLLYWOOD BLVD.								
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					11/28/1951			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	╛
21	•	26			59-0662755	Γ	Not Applicable	7
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		1	_ \$8.	.75 Additional	7
22		27			5. Certificate of Status Desired	F	ee Required -	
- City & State	- <del>العلى د العاب الإراد و</del>	City & State			6. Election Campaign Financing	_ \$5	5.00 May Be	1
23		28			Trust Fund Contribution		dded to Fees	l
Zip	Country	Zip	Countr	у	8. This corporation owes the curr	ent vear Intangible	3	٦
24	25	29 3	0		Personal Property Tax.	Í Ye		
24	9. Name and Address of Curren		<del>~</del>		10. Name and Address of New F	egistered Agent		
			8	1 Name				
СОН	ien, Lewis							_
	HOLLYWOOD BLVD		8:	2 Street A	Address (P.O. Box Number is Not Accepta	ble)		
HOLLYWOOD FL 33020			-	83			<del></del>	+
"	ETWOOD TE OOOEO		"	<b>"</b>		•	2.38.22	
	,-,-	The state of which is not a state of the sta		4 City.∉≾	AT COUNTY OF THE PROPERTY OF	85	Zip Code	
	7,348	<b>,一种"数据的数据"的"通行","通行","通行","通行","通行","通行","通行","通行",</b>	120	學合物認識	the of the state o	<b>泰登尼区部数</b>		<b>4</b>
11. Pursuant t	to the provisions of Sections 607.050	2 and 607 1508) Florida Statutes	the abo	ve-named o	corporation submits this statement for the	purpose of chang it the appointment	ing its registered	1
1 Office of te	egistered agent, or both, in the state i					The opposite of		
agent. I ar	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	la Statute	s.				ļ
	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	da Statute	s.	corporation submits this statement for the iration's board of directors. I'hereby, accep			
SIGNATURE	m familiar with, and accept the obligat	_			equired when reinstating)	DATE		 
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE: F				DATE FICERS AND DIR	ECTORS IN 12	
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE: F	Registered Ag	ent signature re	equired when reinstating)	DATE	ECTORS IN 12	
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE: F	Registered Ag	ent signature re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12	
SIGNATURE  12. TITLE	Signature, typed or printed name of registered ager OFFICERS AN	at and title if applicable. (NOTE: F	13. 1.1 TITLE	ent signature re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12	
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager OFFICERS AN P COHEN, LEWIS	at and title if applicable. (NOTE: F	13. 1.1 TITLE	ent signeture re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange	
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN P COHEN, LEWIS 1919 HOLLYWOOD BLVD	at and title if applicable. (NOTE: F	13. 1.1 TITLE 1.2 NAME	ent signature re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ager OFFICERS AN P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS	at and title if applicable. (NOTE: F D DIRECTORS   DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY-	ent signeture re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registared agen OFFICERS AN P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN	at and title if applicable. (NOTE: F D DIRECTORS   DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F D DIRECTORS   DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE	ent signature re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registared agen OFFICERS AN P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN	at and title if applicable. (NOTE: F	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY-	ent signature re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F D DIRECTORS   DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE	ent signature re  ET ADDRESS ST-ZIP  ET ADDRESS	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME	ent signature re	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE	ent signature re ET ADDRESS ST- ZIP ET ADDRESS -ST- ZIP ET ADDRESS	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F) D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY	ent signature re  ET ADDRESS ST- ZIP  ET ADDRESS -ST- ZIP  ET ADDRESS  ET ADDRESS	equired when reinstating)	DATE FICERS AND DIR	hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE	ent signature re  ET ADDRESS ST- ZIP  ET ADDRESS -ST- ZIP  ET ADDRESS -ST- ZIP	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F) D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4. 2 NAME	ent signature re  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	equired when reinstating)	DATE FICERS AND DIR	hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F) D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME	ent signature re  ET ADDRESS ST- ZIP  ET ADDRESS -ST- ZIP  ET ADDRESS -ST- ZIP	equired when reinstating)	DATE FICERS AND DIR	hange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	D DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition hange Addition hange Addition	n   n   n
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	at and title if applicable. (NOTE: F) D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE	ent signature re  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS ST-ZIP	equired when reinstating)	DATE FICERS AND DIR	hange Addition	n   n   n
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	D DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY-	ent signature re  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS ST-ZIP	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition hange Addition hange Addition	n   n   n
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	D DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ent signature re  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS ST-ZIP	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition hange Addition hange Addition	n   n   n
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	D DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ent signature re  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  E ET ADDRESS ST-ZIP  E ET ADDRESS ST-ZIP	equired when reinstating)	DATE FICERS AND DIR	ECTORS IN 12 hange Addition hange Addition hange Addition	n   n   n
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P COHEN, LEWIS 1919 HOLLYWOOD BLVD HOLLYWOOD FL VPS COACHES, RONNA COHEN 1919 HOLLYWOOD BV	D DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	equired when reinstating)	DATE FICERS AND DIR CI	ECTORS IN 12 hange Addition hange Addition hange Addition	

CITY-ST-ZIP 14. I 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

ICER OR DIRECTOR