

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005999

FILED
Feb 17, 2005
Secretary of State

Entity Name: LOEHMANN'S OPERATING CO.

Current Principal Place of Business:

2500 HALSEY STREET
BRONX, NY 10461

New Principal Place of Business:

Current Mailing Address:

2500 HALSEY STREET
BRONX, NY 10461

New Mailing Address:

FEI Number: 13-4136681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 323010000 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCEO () Delete
Name: FRIEDMAN, ROBERT
Address: 2500 HALSEY STREET
City-St-Zip: BRONX, NY 10461

Title: PSCO () Delete
Name: GLASS, ROBERT
Address: 2500 HALSEY STREET
City-St-Zip: BRONX, NY 10461

Title: VPC () Delete
Name: MORRETTA, RICHARD
Address: 2500 HALSEY STREET
City-St-Zip: BRONX, NY 10461

Title: D (X) Delete
Name: FOX, WILLIAM J
Address: 2500 HALSEY STREET
City-St-Zip: BRONX, NY 10461

Title: D (X) Delete
Name: GIGLI-GREAR, CAROL
Address: 2500 HALSEY STREET
City-St-Zip: BRONX, NY 10461

Title: D (X) Delete
Name: LIPOFF, CORY
Address: 2500 HALSEY STREET
City-St-Zip: BRONX, NY 10461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 Section 119.07(3)(i), 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: RICHARD MORRETTA

VPC

02/17/2005

Electronic Signature of Signing Officer or Director

Date