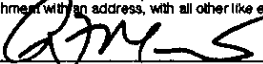


FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90950 035 ***158.75

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F00000005999					
1. Entity Name LOEHMANN'S OPERATING CO.					
Principal Place of Business 2500 HALSEY STREET BRONX, NY 10461			Mailing Address 2500 HALSEY STREET BRONX, NY 10461		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
4. FEI Number 13-4136681				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent NATIONAL CORPORATE RESEARCH, LTD., INC. 103 N. MERIDIAN STREET TALLAHASSEE, FL 32301-0000				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating.) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
Delete ☐			Change ☒ Addition ☐		
TITLE	CEO		TITLE	Chairman & CEO	
NAME	FRIEDMAN, ROBERT		NAME		
STREET ADDRESS	2500 HALSEY STREET		STREET ADDRESS		
CITY-STATE-ZIP	BRONX, NY 10461		CITY-STATE-ZIP		
TITLE	COOP		TITLE	President, CEO, CFO, & Secretary	
NAME	GLASS, ROBERT		NAME		
STREET ADDRESS	2500 HALSEY STREET		STREET ADDRESS		
CITY-STATE-ZIP	BRONX, NY 10461		CITY-STATE-ZIP		
TITLE	VPC		TITLE	Richard Morretta	
NAME	MORETTA, RICHARD		NAME		
STREET ADDRESS	2500 HALSEY STREET		STREET ADDRESS		
CITY-STATE-ZIP	BRONX, NY 10461		CITY-STATE-ZIP		
TITLE	D		TITLE		
NAME	FOX, WILLIAM J		NAME		
STREET ADDRESS	2500 HALSEY STREET		STREET ADDRESS		
CITY-STATE-ZIP	BRONX, NY 10461		CITY-STATE-ZIP		
TITLE	D		TITLE	Carol Gigli-Greer	
NAME	GRIER, CAROL		NAME		
STREET ADDRESS	2500 HALSEY STREET		STREET ADDRESS		
CITY-STATE-ZIP	BRONX, NY 10461		CITY-STATE-ZIP		
TITLE	D		TITLE		
NAME	LIPOFF, CORY		NAME		
STREET ADDRESS	2500 HALSEY STREET		STREET ADDRESS		
CITY-STATE-ZIP	BRONX, NY 10461		CITY-STATE-ZIP		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Richard Morretta 3/27/03 (718) 409-2000					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

90075686

☐ CHECK HERE IF MAKING CHANGES

CR2EC04 (10/02)