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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # F9200000124

1. Corporation Name STUART WEITZMAN, INC.

**FILED** Feb 18, 1999 8:00am **Secretary of State** 

02-18-1999 90125 040 \*\*\*150.00



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Principal Place of Business Mailing Address				r somstode zirke amste broke dents metst dette mette dette betief betief timble f			1816 11614 STE1 1881	
2400 EAST CO SUITE 506	OMMERCIAL BLVD	2400 EAST COMMERCIAL BLVD SUITE 506						
FT. LAUDERD	ALE FL 33308	FT. LAUDERDALE FL 33308	FT. LAUDERDALE FL 33308			DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualifed		
						11/06/1992		
	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26			ĺ	65-0366394		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								5 Additional
22 27						_5. Certifcate of Status Desired		Required
City & State City & State						6. Election Campaign Financing	\$5.0	O May Be
23		28	8			Trust Fund Contribution		d to Fees
Zip				Country		8. This corporation owes the current year l		<del></del>
24	25 29 30				Personal Property Tax.			
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	d Agent	······································
THE	PRENTICE-HALL CORPORATION	I SVETEM INC	8	1 Nam	e			
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET				82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 105				Officer Address (F.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301			8	3				
i in	LATINGSEE PL 32301			1 014			<del></del>	
			84	,		FI	1 1 '	o 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the obligations of Section 607.0505 Florida Such Change								
agent. I a	egistered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was autions of Section 607,0505. Florid	thorized by da Statute	the cor	rporation's	board of directors. I hereby accept the appo	ointment as r	registered
SIGNATURE								
OIGIVATORE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: F	Registered Age	nt signatur	nw beriuper e	nen reinstating) DATE		<del></del>
12.	OFFICERS ANI		13.		· · · · · ·	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE				Change	
NAME	WEITZMAN, STUART		1.2 NAME				_ ,	
STREET ADDRESS	169 TACONIC ROAD		1.3 STREE	TADORES	s			. [
CITY-ST-ZIP	GREENWICH CT 06831		1.4 CITY-S	T-71P	1			
TITLE	S	☐ DELETE	2.1 TITLE	7. 2.,	<del>                                     </del>		- Change	Addition
NAME	I ICHODI II IDV		2.2 NAME		}		- 🗀 Onango	
STREET ADDRESS	2400 EAST COMMEDIAL BLVD CHITE FOR			T ADDRESS	.			ļ
CITY-ST-ZIP	FT. LAUDERDALE FL	,	2.4 CITY-5		<b>"</b>			<u>.</u>
TITLE	T	☐ DELETE	3.1 TITLE	31-ZIP	<del>-</del>	<u> </u>		T A dates
NAME	KUNDUCE DAILID		3.2 NAME				☐ Change	☐ Addition
STREET ADDRESS	ADDRESS 2400 EAST COMMEDIAL DIVID CHITE SOC			T ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL	, 00112 000			<u>`</u>		•	1
TITLE	V	☐ DELETE	3.4. CITY-S 4.1 TITLE	1-41	<del>                                     </del>	,	ПО	
NAME	WEITZMAN, JANE		4.1 IIILE		1		☐ Change	☐ Addition
STREET ADDRESS	169 TACONIC ROAD		1					
CITY-ST-ZIP	GREENWICH CT 06831		4.3 STREET		3			}
TITLE		☐ DELETE	4.4 CITY-S	T-ZIP	-			
NAME		□ OCLETE	5.1 TITLE 5.2 NAME				Change	Addition
STREET ADDRESS				1000			•	.
· ·		ļ	5.3 STREET		']			
CITY-ST-ZIP TITLE			5.4 CITY-ST	-ZIP	-			
		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME PERFECT ADODESS			6.2 NAME		1			
STREET ADDRESS			6.3 STREET					ļ
CITY-ST-ZIP			6.4 CITY-ST	- ZIP	1			ļ

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.

SIGNATURE: