

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

FILED  
May 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F96000002490 (8)

1. Corporation Name  
FRANKEL'S HOME FURNISHINGS, INC.



Principal Place of Business  
6 HARBOR PARK DR  
PORT WASHINGTON NY 11050

Mailing Address  
6 HARBOR PARK DR  
PORT WASHINGTON NY 11050

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

05/17/1996

4. FEI Number

11-2777185

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC  
NAME SHERWOOD, NED  
STREET ADDRESS 120 W 45TH ST #2800  
CITY-ST-ZIP NY NY 10036 ☐ DELETE

TITLE CEO  
NAME SHERWOOD, NED  
STREET ADDRESS 120 W 45TH ST #2800  
CITY-ST-ZIP NY NY 10036 ☐ DELETE

TITLE D  
NAME OYSTER, JEFFREY  
STREET ADDRESS 120 W. 45TH ST., #2800  
CITY-ST-ZIP NY NY ☐ DELETE

TITLE D  
NAME FALKTOFT, HENRIK  
STREET ADDRESS 120 W 45TH ST #2800  
CITY-ST-ZIP NY NY 10036 ☐ DELETE

TITLE DPST  
NAME GATTA, WILLIAM  
STREET ADDRESS 6 HARBOR PARK DR  
CITY-ST-ZIP PORT WASHINGTON NY 11050 ☐ DELETE

TITLE CFO  
NAME GATTA, WILLIAM  
STREET ADDRESS 6 HARBOR PARK DR  
CITY-ST-ZIP PORT WASHINGTON NY 11050 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DS  
1.2 NAME GERALD DEUTSCH  
1.3 STREET ADDRESS 6 HARBOR PARK DRIVE  
1.4 CITY-ST-ZIP PORT WASHINGTON, NY 11050 ☐ Change ☒ Addition

2.1 TITLE CONTROLLER  
2.2 NAME JOSEPH IZZO  
2.3 STREET ADDRESS 6 HARBOR PARK DRIVE  
2.4 CITY-ST-ZIP PORT WASHINGTON, NY 11050 ☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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.

CR2E034 (10/97)