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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700003242

1. Corporation Name

ZACHARY'S RETAIL GROUP, INC.

Principal Place of Business		Mailing Address			() ***********************************	.,		
1620 GRAND AVE		1620 GRAND AVE		- 1				
BALDWIN NY 11510		BALDWIN NY 11510		Į	DO NOT WRITE IN THIS SPACE			
					-	3. Date Incorporated or Qualifed 06/20/1997		
	land of During	2a. Mailing Address				4, FEI Number		plied For
	lace of Business	h *				11-3316778	├	ot Applicable
Suite, Apt. #, etc.		Suite Apt # etc	Suite, Apt. #, etc.				\$8.75	
22		<u> </u>	27		ł	5. Certifcate of Status Desired	Fee Re	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Country	,		8. This corporation owes the current year	Intangible	
24	25	29 3	0	_	1	Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registers	d Agent	
			81	Name				
CORPORATION SERVICE COMPANY			82	82 Street Address (P.O. Box Number is Not Acceptable)				
	HAYS STREET							
TALL	AHASSEE FL 32301-2525		83					Į
			84	City		F	85 Zip (Code
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: R	egistered Age	nt signature re	equired w	hen reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	 DRS IN 12
TITLE			1.1 TITLE		PD		Change	Addition
NAME			12 NAME	1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		LIAM R. SIEGEL		
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		1.3 STREE	3 STREET ADDRESS 1600 GRANT AVE			}	
CITY-ST-ZIP	BALDWIN NY 11510			1.4 CITY-ST-ZIP		BALDVIN NY 11210		
TITLE	SD	₩ DELETE	2.1 TITLE			י הי	Change	Addition
NAME	_		2.2 NAME	2.2 NAME PC		WALD LUBEL LOD GRAND AVE		}
STREET ADDRESS	•		2.3 STREE	2.3 STREET ADDRESS		20 GRAND ALL		
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	乃	ALTUN NY 11510		
TITLE			31 TITLE	31 TITLE		Tag (TD	☐ Change	Addition
NAME			3.2 NAME			ALAN R. COHEN 1620 GRAND AVE DALDWIN NY 11510		1
STREET ADDRESS			3.3 STREE	T ADDRESS		1600 GRANDA		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	ļ.,	BALDWIN PY 113/C		
TITLE	☐ DELETE 41T		41 TITLE		}		Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				1
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP				C Addition
TITLE		☐ DELETE	5.1 TITLE				, Change	Addition
NAME			5.2 NAME	T ADDDESS				
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP		☐ D€LETE	5.4 CITY-1	51-ZIP	<u> </u>		☐ Change	Addition
TITLE		☐ DELETE	6.2 NAME				C) Orientage	
NAME	I		O.Z IVAVIC		1			ı

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

CITY-ST-ZIP

PONALD ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUBEL

Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90001 007 ***150.00