

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

FILED
Feb 26, 1999 8:00 am
Secretary of State

02-26-1999 90003 032 ***150.00

DOCUMENT # F97000003966

1. Corporation Name

EDDIE BAUER INTERNATIONAL (AMERICAS), INC.

Principal Place of Business

ROOKS, PITTS AND POUST C/O JAY A LIPE
10 SOUTH WACKER DRIVE, SUITE 2300
CHICAGO IL 60606

Mailing Address

ROOKS, PITTS AND POUST C/O JAY A LIPE
10 SOUTH WACKER DRIVE, SUITE 2300
CHICAGO IL 60606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1997

4. FEI Number

65-0772295

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD
TULLENERS, JAKOB J
STREET ADDRESS 19/F PENINSULA SQ, 18 SUNG ON STREET
CITY-ST-ZIP HUNG HOM, KOWLOON, HONG KONG

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME V
CAVE, ANTHONY N
STREET ADDRESS 20/F PENINSULA SQ, 18 SUNG ON STREET
CITY-ST-ZIP HUNG HOM, KOWLOON, HONG KONG

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME D
GEISE, VEIT
STREET ADDRESS 6161 BLUE LAGOON DR SUITE 310
CITY-ST-ZIP MIAMI FL 33126

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME VT
VOGELSGANG, CHRISTOPHER
STREET ADDRESS 6161 BLUE LAGOON DR SUITE 310
CITY-ST-ZIP MIAMI FL 33126

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME S
SEXTON, MICHAEL F
STREET ADDRESS 10 S. WACKER DRIVE SUITE 2300
CITY-ST-ZIP CHICAGO IL 60606

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME D
FECHTNER, ECKARDT
STREET ADDRESS WANDSBEKER STRABE 3-7, 22172 HAMBURG
CITY-ST-ZIP GERMANY

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-99

Date

312/876-1700

Daytime Phone #

CR2E034 (1/98)