

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H32135 (6)

1. Corporation Name

MARSHALLS OF BRANDON, FL., INC.

Principal Place of Business

C/O TAX DEPT.
200 BRICKSTONE SQ.
ANDOVER MA 01810

Mailing Address

C/O TAX DEPT.
200 BRICKSTONE SQ.
ANDOVER MA 01810

3. Date Incorporated or Qualified
11/30/1984

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 ATTN: CORP TAX DEPT RT 1E
23 770 COCHITUATE ROAD
24 FRAMINGHAM, MA 01701
25 Country
26 Suite, Apt. #, etc.
27 ATTN: CORP TAX DEPT RT 1E
28 770 COCHITUATE ROAD
29 FRAMINGHAM, MA 01701
30 Country

4. FEI Number
04-2843857

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

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 | NAME | STREET ADDRESS | CITY - ST - ZIP | DELETED |
|-------|------|--------------------|-----------------------------------|-------------------------------------|
| | D | GOLDSTEIN, STANLEY | ONE THEALL RD. RYE NY | <input checked="" type="checkbox"/> |
| | PD | ROSSI, JERRY | 200 BRICKSTONE SQ. ANDOVER MA | <input checked="" type="checkbox"/> |
| | T | COHEN, IRWIN | 200 BRICKSTONE SQ. ANDOVER MA | <input checked="" type="checkbox"/> |
| | VPS | AMBRO, J. G | 200 BRICKSTONE SQ.. ANDOVER MA | <input checked="" type="checkbox"/> |
| | D | WARREN FEIDBERG | 200 BRICKSTONE SQ ANDOVER MA | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP | Change | Addition |
|-------------------|----------|--------------------|---------------------|--------------------------|--------------------------|
| SEE ATTACHED LIST | | | | | |
| 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |

900001788869
-04/22/96--01056--009

***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICE PRESIDENT

Date

Daytime Phone #

APR 15 1996

CR2E034 (12/95)

2 of 2

MARSHALLS OF ROSEVILLE, MINN., INC.
MARSHALLS OF RICHFIELD, MN., INC.
MARSHALLS INC. AND ALL SUBSIDIARIES
OFFICERS & DIRECTORS
MARCH 14, 1996

| | |
|-----------------------------|-------------------------------|
| PRESIDENT | RICHARD LESSER |
| VICE PRESIDENT | ALFRED APPEL |
| VICE PRESIDENT | DONALD CAMPBELL |
| VICE PRESIDENT | DAVID WEINER |
| VICE PRESIDENT | IRVING RITZ |
| TREASURER | STEVEN R. WISHNER |
| ASSISTANT TREASURER\ | MARY B. REYNOLDS |
| ASSISTANT SECRETARY | |
| SECRETARY | JAY H. MELTZER |
| ASSISTANT SECRETARY | KEVIN FOX |
| ASSISTANT SECRETARY | ANN MCCAULEY |
| CHAIRMAN BOARD OF DIRECTORS | BERNARD CAMMARATA |
| DIRECTOR | DONALD CAMPBELL |
| DIRECTOR | RICHARD LESSER |
| BUSINESS ADDRESS | ANNUAL MEETING |
| (FOR ALL OF THE ABOVE): | FIRST TUESDAY IN JUNE |
| ATTN: CORP. TAX DEPT. | TERM OF OFFICE FOR |
| 770 COCHITUATE ROAD | ALL OF THE ABOVE: |
| FRAMINGHAM, MA 01701 | MARCH 14, 1996 - JUNE 4, 1996 |