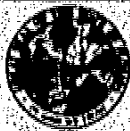


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 PM 1:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J09115** (3)

1. Corporation Name

THE RAG SHOP/PALM BEACH GARDENS INC.

Principal Place of Business

**PALM BEACH GARDENS SHOPPING PLAZA
4230 N. LAKE BOULEVARD
PALM BEACH GARDENS FL 33410
US**

Mailing Address

**THE RAG SHOP/PALM BEACH GARDENS INC
111 WAGARAW RD
HAWTHORNE NJ 07508
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/14/1986

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2663739

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. 190.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

25 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

82 Street Address (P.O. Box Number is Not Acceptable)

1201 HAYES STREET

83

SUITE 105

84 City

TALLAHASSEE

FL

85 Zip Code

32301

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 filer if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CD
BERENZWEIG, STANLEY
111 WAGARAW RD.,RAG SHOP
HAWTHORNE NJ**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
BERENZWEIG, DORIS
111 WAGARAW RD.,RAG SHOP
HAWTHORNE NJ**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
LOMBARDO, JUDITH
111 WAGARAW RD.,RAG SHOP
HAWTHORNE NJ**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
~~MOGLURE, WARREN~~
111 WAGARAW RD.,RAG SHOP
HAWTHORNE NJ**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
BERENZWEIG, EVAN
111 WAGARAW RD.,RAG SHOP
HAWTHORNE NJ**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VT
BARNETT, STEVEN
111 WAGARAW RD.,RAG SHOP
HAWTHORNE NJ**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **C/O/P** ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP **HAWTHORNE, NJ 07506** ☒ Change ☐ Addition

2.1 TITLE **S** ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP **HAWTHORNE, NJ 07506** ☒ Change ☐ Addition

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP **HAWTHORNE, NJ 07506** ☒ Change ☐ Addition

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP **DELETE** ☒ Change ☐ Addition

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP **HAWTHORNE, NJ 07506** ☒ Change ☐ Addition

6.1 TITLE **V/T/D** ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP **HAWTHORNE, NJ 07506**

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 110.07(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Steven Barnett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN BARNETT, SENIOR VICE PRESIDENT

APR 18 1995

Date

(201) 423-1303

Telephone Number