

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J09115

1. Entity Name

THE RAG SHOP/PALM BEACH GARDENS INC.

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

05-17-2000 91062 001 \*3,000.00

Principal Place of Business Mailing Address  
PALM BEACH GARDENS SHOPPING PLAZA THE RAG SHOP/PALM BEACH GARDENS INC  
4230 N. LAKE BOULEVARD 111 WAGARAW RD  
PALM BEACH GARDENS FL 33410 HAWTHORNE NJ 07506-2720  
US US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2663739

Applied For  
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CD ☐ Delete  
NAME BERENZWEIG, STANLEY  
STREET ADDRESS 111 WAGARAW RD., RAG SHOP  
CITY-ST-ZIP HAWTHORNE NJ  
TITLE S ☐ Delete  
NAME BERENZWEIG, DORIS  
STREET ADDRESS 111 WAGARAW RD., RAG SHOP  
CITY-ST-ZIP HAWTHORNE NJ  
TITLE V ☐ Delete  
NAME LOMBARDO, JUDITH  
STREET ADDRESS 111 WAGARAW RD., RAG SHOP  
CITY-ST-ZIP HAWTHORNE NJ  
TITLE V ☐ Delete  
NAME BERENZWEIG, EVAN  
STREET ADDRESS 111 WAGARAW RD., RAG SHOP  
CITY-ST-ZIP HAWTHORNE NJ  
TITLE VTD ☐ Delete  
NAME BARNETT, STEVEN  
STREET ADDRESS 111 WAGARAW RD., RAG SHOP  
CITY-ST-ZIP HAWTHORNE NJ  
TITLE PD ☐ Delete  
NAME AARONSON, MICHAEL  
STREET ADDRESS 111 WAGARAW RD., RAG SHOP  
CITY-ST-ZIP HAWTHORNE NJ

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ Change ☐ Addition  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: T. Aaronson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/00  
Date

973-423-1303  
Daytime Phone #

CR2E034 (9/99)