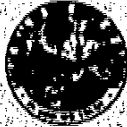


**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

**95 APR 26 PM 2:24**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**DOCUMENT # J97635 (3)**

**1. Corporation Name**

**MARSHALLS OF MIAMI-FLAGLER, FL. INC.**

**356**

**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**

**DO NOT WRITE IN THIS SPACE**

**3. Date Incorporated or Qualified  
10/16/1987**

**3a. Date of Last Report  
03/23/1994**

**4. FEI Number  
04-2979984**

**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**

**2. Principal Place of Business**

**21**

**Suite, Apt. #, etc.**

**2a. Mailing Address**

**26**

**Suite, Apt. #, etc.**

**22**

**City & State**

**27**

**City & State**

**23**

**Zip**

**Country**

**28**

**Zip**

**Country**

**24**

**25**

**29**

**30**

**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 registering)**

**DATE**

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP**

**D  
GOLDSTEIN, STANLEY  
ONE THEALL RD.  
RYE NY**

**1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP**

**☐ Change ☐ Addition**

**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP**

**D  
FRIEDHEIM, MICHAEL  
ONE THEALL RD.  
RYE NY**

**2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP**

**☒ Change ☐ Addition**

**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP**

**PCO  
ROSSI, JERRY  
200 BRICKSTONE SQ.  
ANDOVER MA**

**3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP**

**☒ Change ☐ Addition**

**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP**

**T  
COHEN, IRWIN  
200 BRICKSTONE SQ.  
ANDOVER MA**

**4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP**

**☐ Change ☐ Addition**

**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP**

**VP  
AMBRO, J. G  
200 BRICKSTONE SQ.  
ANDOVER MA**

**5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP**

**☒ Change ☐ Addition**

**TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP**

**D  
WARREN FEIDBERG  
200 BRICKSTONE SQ.  
ANDOVER, MA 01810**

**6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP**

**☐ Change ☒ Addition**

**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)(h), 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, changed, or on an attachment with an address.**

**SIGNATURE:**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**4-13-95**

**508-474-7885**