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148 PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K90761

1. Corporation Name

BURLINGTON COAT FACTORY WAREHOUSE OF FLORIDA, IN C.

Principal Place of Business

Mailing Address

1830 RT 130 N
C/O TAX DEPT.
BURLINGTON NJ 08016
US

1830 RT 130 N
C/O TAX DEPT.
BURLINGTON NJ 08016
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/25/1989

4. FEI Number

Applied For

58-1846180

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REINSTEIN, ROBERT
C/O BURLINGTON COAST FACTORY
12801 W. SUNRISE BLVD.
SUNRISE FL 33323

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 DP ☐ DELETE

NAME MILSTEIN, MONROE

STREET ADDRESS 1830 RT 130 N

CITY-ST-ZIP BURLINGTON NJ

TITLE DVP ☐ DELETE

NAME MILSTEIN, HENRIETTA

STREET ADDRESS 1830 RT 130 N

CITY-ST-ZIP BURLINGTON NJ

TITLE DT ☐ DELETE

NAME MILSTEIN, ANDREW

STREET ADDRESS 1830 RT 130 N

CITY-ST-ZIP BURLINGTON NJ 08016

TITLE CFO ☐ DELETE

NAME LE PENTA, ROBERT

STREET ADDRESS 1830 ROUTE 130 NORTH

CITY-ST-ZIP BURLINGTON NJ 08016

TITLE DT ☐ DELETE

NAME MILSTEIN, STEPHEN

STREET ADDRESS 180 ROUTE 130 N.

CITY-ST-ZIP BURLINGTON NJ 08016

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☒ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT J. LAPENTA

4-20-99

Date

Daytime Phone #

609-387-7800

CR2E034 (11/98)