

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **L63010** (7)
1. Corporation Name
THE RAG SHOP/JENSEN BEACH, INC.

Principal Place of Business SQUARE ONE SHOP CTR 3471 NW FEDERAL HWY. JENSEN BEACH FL 34957 US	Mailing Address THE RAG SHOP/JENSEN BEACH, INC. 111 WAGARAW RD HAWTHORNE NJ 07506 US
---	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/06/1990	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0187137		Applied For <input type="checkbox"/> Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	25	29 Zip		30 Country	
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYES STREET SUITE 105 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	

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 filed if applicable (NOTE: Registered Agent signature required when reinstating)	
DATE	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERENZWEIG, STANLEY	1.2 NAME	
STREET ADDRESS	111 WAGARAW ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	HAWTHORNE NJ	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERENZWEIG, DORIS	2.2 NAME	
STREET ADDRESS	111 WAGARAW ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	HAWTHORNE NJ	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERENZWEIG, EVAN	3.2 NAME	
STREET ADDRESS	111 WAGARAW ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	HAWTHORNE NJ	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOMBARDO, JUDITH	4.2 NAME	
STREET ADDRESS	111 WAGARAW ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	HAWTHORNE NJ	4.4 CITY-ST-ZIP	
TITLE	VTD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARNETT, STEVEN	5.2 NAME	
STREET ADDRESS	111 WAGARAW ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	HAWTHORNE NJ	5.4 CITY-ST-ZIP	
TITLE	PD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AARONSON, MICHAEL	6.2 NAME	
STREET ADDRESS	111 WAGARAW ROAD RAG SHOP	6.3 STREET ADDRESS	
CITY-ST-ZIP	HAWTHORNE NJ	6.4 CITY-ST-ZIP	

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.

SIGNATURE