2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

DOCUMENT# P00000044396

Entity Name: RESOURCES WAREHOUSE MIAMI, INC.

Current Principal Place of Business:

1590 N.W. 82ND AVENUE
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

PO BOX 1067
SECAUCUS, NJ 07096

New Mailing Address:

FEI Number: 22-3730525 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ROSEN, STUART
Address: 1375 OXFORD STREET
City-St-Zip: MAHWAH, NJ 07430

Title: D ( ) Delete
Name: MORGAN, DAVID
Address: 1 GOODWILL PLACE
City-St-Zip: METUCHEN, NJ 08840

Title: P ( ) Delete
Name: FOLISE, FRANK V
Address: 48 SEMINARY DRIVE
City-St-Zip: MAHWAH, NJ 07430

Title: TS ( ) Delete
Name: FOLISE, CRAIG
Address: 48 SEMINARY DRIVE
City-St-Zip: MAHWAH, NJ 07430

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ROSEN, STUART
Address: 14 WEST SADDLE RIVER ROAD
City-St-Zip: WALDWICK, NJ 07463

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: SANTAMARIA, ROBERT
Address: 684 SAND CREEK CIRCLE
City-St-Zip: WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG FOLISE TS 07/03/2006

Electronic Signature of Signing Officer or Director — Date