FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 11, 2002 8:00 am Secretary of State DOCUMENT # P00000055710 1. Entity Name 02-11-2002 90011 001 ***150 00 BURLINGTON COAT FACTORY WAREHOUSE OF BRANDON, IN Principal Place of Business Mailing Address 1830 RT 130 1830 RT 130 **BURLINGTON NJ 08016-7800 BURLINGTON NJ 08016-7800** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-1255.3674 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name OLIVER, DON Street Address (P.O. Box Number is Not Acceptable) 12801 WEST SUNRISE BOULEVARD SUNRISE FL 33323 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (9/01) TITLE Delete TITLE EVP5 ☐ Addition TANG PAUL C. NAME MILSTEIN, MONROE NAME CR2E034 STREET ADDRESS STREET ADDRESS 1830 ROURE 130 N 1830 RT 130N **BURLINGTON NJ 08016** CITY-ST-ZIP CITY-ST-ZIP BURLINGTON, NJ 08016 ☐ Delete TITLE Change ☐ Addition TITLE nsv NAME NAME MILSTEIN, ANDREW R STREET ADDRESS STREET ADDRESS 1830 ROURE 130 N CITY-ST-ZIP **BURLINGTON NJ 08016** CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME MILSTEIN, HENRIETTE STREET ADDRESS STREET ADDRESS 1830 ROURE 130 N CITY-ST-ZIP CITY-ST-ZIP **BURLINGTON NJ 08016** TITLE Delete. - 🖃 Addition CFO TITLE - [-] Change NAME LAPENRA, ROBERT NAME STREET ADDRESS STREET ADDRESS 1830 ROURE 130 N CITY-ST-ZIP CITY-ST-ZIP **BURLINGTON NJ 08016** TITLE -- -☐ Delete Change ☐ Addition NAME NAME MILSTEIN, STEPHEN STREET ADDRESS STREET ADDRESS 1830 ROURE 130 N CITY-ST-ZIP CITY-ST-ZIP **BURLINGTON NJ 08016** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

SIGNATURE:

changed, or on an attachment with an address, with all other like