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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

9. Name and Address of Current Registered Agent

DOCUMENT # 1. Corporation Name

ALLIEU STONES GENERAL HEAL				
Principal Place of Business	(154)166(151)1216 (1618 6118) Suidt (414 2184) Britt dien Britt and Caracteristics			
C/O FEDERATRED DEPARTMENT STORES INC. 7 WEST 7TH ST. CINCINNATI OH 45202	C/O FEDERATED DEPARTMENT STORES INC. 7 WEST 77H ST. CINCINNATI OH 45202	DO NOT WRITE IN THIS SPACE		
U\$	US	3. Date Incorporated or Qualified 12/23/1986		
2. Principal Place of Business	2a. Mailing Address 26 c/o Federated Corporate	4. FEI Number Applied For 51-0297086 Not Applied		
Suite, Apt. #, etc.	Suite, Apt. #, etc. Services, Inc. 27 7 West 7th Street	Certificate of Status Desired Sa.75 Additional Fee Required		
City & State	City & State 28 Cincinnati. OH	6. Election Campaign Financing Trust Fund Contribution Added to Fees		
Zio Country	Zip Country	This corporation owes or has paid the current year Intennible		

45202

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324

	Trust Fund Contribution Added to Fees						
untry US	5. This corporation office of the ball the balletin year that give						
\Box	10. Name and Address of New Registered Agent						
81	Name						
82	82 Street Address (P.O. Box Number is Not Acceptable)						
83							
84	City 85 Zip Code						

FILED

Feb 27 1998 8:00am

Secretary of State

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, and accept the objections of Section 607.0505. Florida Statutes

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agont and to	de il applicable (NOTE	: Registered Agent signature	required when rainstating)	DATE			
12.	OFFICERS AND DIR		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	V	☐ Change	X Addition		
NAME	TYSOE, RONALD		1.2 NAME	Nay, Gary J.				
STREET ADDRESS	7 West 7th St.		1.3 STREET ADDRESS	7 West 7th St.				
CITY-ST-ZIP	CINCINNATI OH		1.4 CITY-ST-ZIP	Cincinnati OH				
TITLE	VSD	☐ DELETE	2.1 TITLE	AS	☐ Change	X Addition		
NAME	SIMS, JOHN R.		. 2.2 NAME	Stewart, Gwyneth G.				
STREET ADDRESS	7 West 7th St.		2.3 STREET ADDRESS	7 West 7th St.				
CITY-ST-ZIP	CINCINNATI OH		2. 4 CITY-ST-ZIP	Cincinnati OH				
TITLE	V	☐ DELETE	3.1 TITLE	AS	Change	X Addition		
NAME	Seppelt, Robert C		3.2 NAME	Zavatsky, Kathleen H.				
STREET ADDRESS	7 West 7th St.		3.3 STREET ADDRESS	7 West 7th St.				
CITY-ST-ZIP	CINCINNATI OH		3.4. CITY - ST - ZIP	Cincinnati OH				
TITLE	DV	☐ DELETE	4.1 TITLE	AS	Change	Addition		
NAME	Broderick, Dennis J.		4. 2 NAME	Ziermaier, Klaus M.				
STREET ADDRESS	7 West 7th St.		4.3 STREET ADDRESS	7 West 7th St.				
CITY-ST-ZIP	CINCINNATI OH	<u></u>	4.4 CITY - ST - ZIP	Cincinnati OH				
TITLE	TAS	☐ DELE TE	5.1 TITLE		Change	Addition		
NAME	HOGUET, KAREN M		5.2 NAME					
STREET ADDRESS	7 WEST 7TH ST.		5.3 STREET ADDRESS					
CITY-ST-ZIP	CINCINNATI OH		5.4 CITY - ST - ZIP					
TITLE	AS	☐ DELETE	6.1 TITLE		Change	☐ Addition		
NAME	COX, JACK B.		6.2 NAME					
STREET ADDRESS	7 WEST 7TH ST.		6.3 STREET ADDRESS					
ATTY AT THE	CINCINNATI OH		GAINTY CT. 7ID					

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 chapter, or on an attachment with an address.

Jack B. Cox, Asst. Secy

513-579-7311 2/16/98

Applied For Not Applicable