2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P18425 May 11, 2000 8:00 am 1. Entity Name Secretary of State BABY SUPERSTORE, INC. 05-11-2000 90147 001 ***300.00 Mailing Address Principal Place of Business 225 SUMMIT AVE 225 SUMMIT AVE MONTVALE NJ 07645 MONTVALE NJ 07645-1523 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 57-0527831 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. from the Eller Jr. Change Addition CEOD TITLE TITLE F Delete NAKASONE, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 225 SUMMIT AVE CITY-ST-ZIP CITY-ST-ZIP MONTVALE NJ 07645 John H. Euler IV. Addition Change E Delete TITLE TITLE KRYSIAK, BRUCE NAME NAME STREET ADDRESS STREET ADDRESS 395 WEST PASSAIC ST CITY-ST-ZIP CITY-ST-7IP **ROCHELLE PARK NJ 07662** Addition ☐ Change TITLE CFO ☐ Delete TITLE NAME NAME LIPSCHITZ, LOUIS STREET ADDRESS STREET ADDRESS 225 SUMMIT AVE CITY-ST-ZIP CITY-ST-ZIP **MONTVALE NJ 07645** ichael TRANK ☐ Addition TITLE TITLE [Delete NAME NAME MILLER, MICHAEL STREET ADDRESS STREET ADDRESS 225 SUMMIT AVE CITY-ST-ZIP CITY-ST-ZIP MONTVALE NJ 07645 Z Jelete. ☐ Addition TITLE TITLE WEISS, ANDRE NAME STREET ADDRESS STREET ADDRESS **225 SUMMIT AVE** CITY-ST-ZIP CITY-ST-ZIP MONTVALE NJ 07645 □ Change Addition AS ☐ Delete TITLE TITLE NAME TAPLITS, STEVEN STREET ADDRESS STREET ADDRESS 225 SUMMIT AVE CITY-ST-ZIP CITY-ST-ZIP MONTVALE NJ 07645

13. 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 changed, or on an attachment with 2n address, with all other like empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

SIGNATURE:

Steven Copit

(20)80-55 Daytuse Phone #