## 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

**19**98

DOCUMENT # P20089 (9)

THE CHILDREN'S PLACE RETAIL STORES, INC.

**FILED** 

May 12 1998 8:00am

Secretary of State

| Principal Place   | e of Business                        | Mailing Address              |                      |  | IDIT DEGLE BEDIT OIDIT BEDIT GEBET (03) |
|---|--------------------------------------|------------------------------|----------------------|--|---|
| 1 DODOGE DRIVE 1 DODOGE DR  |                                      | 1 DODOGE DRIVE               |                      |  |   |
| WEST CALDWELL NJ 07006<br>US  |                                      | WEST CALDWELL NJ 07006<br>US |                      | DO NOT WRITE IN THIS SPACE                             |   |
|   |                                      |                              |                      | 3. Date Incorporated or Qualified                      |   |
|   |                                      | ·····                        |                      | 07/18/1988   |   |
|   | lace of Business                     | 2a. Mailing Address          | DRIVE                | 4. FEI Number  | Applied For                             |
| 21 1 10   | LITE DKIVE                           | 26 1 1)0174                  | TKIIC .              | 31-1241495   | Not Applicable                          |
| Suite, Apt.   | #, <b>6</b> tC.                      | Suite, Apt. #, etc.          |                      | 5. Certificate of Status Desired                       | 38.75 Additional Fee Regulred           |
| City & State  |                                      | City & State                 |                      |  |   |
|   | CALDWELL NJ                          | 28 WEST CAU                  | WELL, M              | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be<br>Added to Fees          |
| Zig   | Country                              | ROOM -                       | Country              | 8. This corporation owes or has paid                   | the current year Intangible             |
| 24 <i>O'10</i>  | UG 25 USH                            | 29 0 / 000 30                | USH                  | Personal Property Tax due June 30                      |   |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  |                                      |                              |                      |  |   |
|   | <b>IITED</b> CORPORATE SERVICES, INC | ; <b>.</b>                   | 81 Name              |  |   |
| 801 NORTHEAST 167TH STREET  |                                      |                              | 82 Street Addr       | ress (P.O. Box Number is Not Acceptable                |   |
| SUITE 305   |                                      |                              |                      |  | <b>4</b>                                |
| NORTH MIAMI BEACH FL 33162  |                                      |                              | 83                   |  |   |
|   |                                      |                              | 84 City              |  | FL 85 Zip Code                          |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules. |                                      |                              |                      |  |   |
| agent, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statules.   |                                      |                              |                      |  |   |
| SIGNATURE Signature, typest or product name of registered agest and use of applicable. (NOTE Registered Agent signature required when reinstaling)  DATE  |                                      |                              |                      |  |   |
| 12.   | OFFICERS AND I                       |                              | 13.                  | ADDITIONS/CHANGES TO OFFICE                            |   |
| TITLE   | P                                    | ☐ DELETE                     | 1.1 TITLE            |  | Change Addition                         |
| NAME  | SILVER, STAN                         |                              | 1.2 NAME             |  |   |
| STREET ADDRESS  | 1 DODGE DR                           |                              | 1.3 STREET ADDRESS   |  | {                                       |
| CITY-ST-ZIP   | WEST CALDWELL NJ 07006               |                              | 1.4 CITY - ST - ZIP  |  | \ <u>`</u>                              |
| TITLE   | <b>VP</b>                            | DELETE                       | 2.1 TUTLE            |  | Change Addition                         |
| NAME  | CIAMPI, MARIO                        |                              | 2.2 NAME             |  |   |
| STREET ADDRESS  | ONE DODGE DRIVE                      |                              | 2.3 STREET ADDRESS   |  | . ·                                     |
| CITY-ST-ZIP   | WEST CALDWELL NJ 07006               |                              | 2. 4 CITY - ST - 7/F |  | • •                                     |
| TITLE   | 8                                    | ☐ DELETE                     | 3.1 TITLE            |  | Change Addition                         |
| NAME  | <b>B</b> ALASIANO, STEVEN            |                              | 3.2 NAME             |  |   |
| STREET ADDRESS  | 1 DODOGE DRIVE                       |                              | 3 3 STREET ADDRESS   |  |   |
| CITY-ST-ZIP   | WEST CALDWELL NJ 07006               |                              | 3.4. CHY-ST-7IP      |  |   |
| TITLE   | 18                                   | ☐ DELETE                     | 4.1 TITLE            |  | Change Addition                         |
| NAME  | udasin, seth                         |                              | 4 2 NAME             |  |   |
| STREET ADDRESS  | 1 DODOGE DRIVE                       |                              | 4.3 STREET ADDRESS   |  |   |
| CITY-ST-ZIP   | WEST CALDWELL NJ 07006               |                              | 4.4 CITY - ST - 7IP  |  |   |
| TITLE   | D                                    | ☐ DELETE                     | 5.1 TITLE            |  | Change Addition                         |
| NAME  | STANLEY, SILVERSTEIN                 |                              | 5.2 NAME             |  |   |
| STREET ADDRESS  | 730 5TH AVE, 8TH FLOOR               |                              | 5.3 STREET ADDRESS   |  |   |
| CITY-ST-ZIP   | NY NY 10019                          |                              | 5.4 CITY-ST-ZIP      |  |   |
| TITLE   | 0                                    | DELETE                       | 6.1 THUE             |  | ☐ Change ☐ Addition                     |
| NAME  | ODDI, DAVID                          |                              | 62 NAME              |  |   |
| STREET ADDRESS  | 667 MADISON AVE                      |                              | 6.3 STREET ALIDRESS  |  |   |
| CITY-ST-ZIP   | NY NY 10021                          |                              | 6.4 CITY-S1 · ZIP    |  |   |

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 a faddress.

## THE CHILDREN'S PLACE RETAIL STORES, INC.

## FEDERAL ID# 31-1241495

OFFICERS:

STANLEY SILVER

PRESIDENT

1 DODGE DRIVE

WEST CALDWELL, NJ 07006

MARIO CIAMPI

VICE PRESIDENT

1 DODGE DRIVE

WEST CALDWELL, NJ 07006

STEVEN BALASIANO

SECRETARY

1 DODGE DRIVE

WEST CALDWELL, NJ 07006

SETH UDASIN

TREASURER/

ASSISTANT SECRETARY

1 DODGE DRIVE

WEST CALDWELL, NJ 07006

DIRECTORS:

STANLEY SILVERSTEIN

C/O NINA FOOTWEAR CORP 730 5TH AVENUE, 8TH FLOOR

NEW YORK, NY 10019

EZRA DABAH

C/O THE CHILDREN'S PLACE RETAIL STORES, INC.

1 DODGE DRIVE

WEST CALDWELL, NJ 07006

STANLEY SILVER

C/O THE CHILDREN'S PLACE RETAIL STORES, INC.

1 DODGE DRIVE

WEST CALDWELL, NJ 07006

DAVID ODDI

C/O SAUNDERS KARP & CO. 667 MADISON AVENUE NEW YORK, NY 10021

JOHN MEGRUE

C/O SAUNDERS KARP & CO. 667 MADISON AVENUE NEW YORK, NY 10021