

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 07, 2000 8:00 am**  
**Secretary of State**  
 07-07-2000 90461 050 \*\*\*150.00

DOCUMENT # P20089

1. Entity Name

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

Principal Place of Business

**915 SECAUCUS RD.**  
**SECAUCUS, NJ 07094**

Mailing Address

**915 SECAUCUS RD.**  
**SECAUCUS, NJ 07094**

2. Principal Place of Business

**915 SECAUCUS ROAD**  
 Suite, Apt. #, etc.

3. Mailing Address

**915 SECAUCUS ROAD**  
 Suite, Apt. #, etc.

City & State

**SECAUCUS, NJ**

City & State

**SECAUCUS, NJ**

4. FEI Number

**31-1241495**

Applied For

Not Applicable

Zip

**07094**

Country

**HUDSON**

Zip

**07094**

Country

**HUDSON**

5. Certificate of Status Desired

☐

**\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES, INC.**  
**801 NORTHEAST 167TH ST.**  
**SUITE 305**  
**NORTH MIAMI BEACH, FL 33162**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

☐

**\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

|                |                                 |
|----------------|---------------------------------|
| TITLE          | <input type="checkbox"/> Delete |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY-ST-ZIP    |                                 |
| TITLE          | <input type="checkbox"/> Delete |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY-ST-ZIP    |                                 |
| TITLE          | <input type="checkbox"/> Delete |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY-ST-ZIP    |                                 |
| TITLE          | <input type="checkbox"/> Delete |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY-ST-ZIP    |                                 |
| TITLE          | <input type="checkbox"/> Delete |
| NAME           |                                 |
| STREET ADDRESS |                                 |
| CITY-ST-ZIP    |                                 |

**SEE ATTACHED**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |                                 |                                   |
|----------------|---------------------------------|-----------------------------------|
| TITLE          | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME           |                                 |                                   |
| STREET ADDRESS |                                 |                                   |
| CITY-ST-ZIP    |                                 |                                   |
| TITLE          | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME           |                                 |                                   |
| STREET ADDRESS |                                 |                                   |
| CITY-ST-ZIP    |                                 |                                   |
| TITLE          | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME           |                                 |                                   |
| STREET ADDRESS |                                 |                                   |
| CITY-ST-ZIP    |                                 |                                   |
| TITLE          | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME           |                                 |                                   |
| STREET ADDRESS |                                 |                                   |
| CITY-ST-ZIP    |                                 |                                   |
| TITLE          | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME           |                                 |                                   |
| STREET ADDRESS |                                 |                                   |
| CITY-ST-ZIP    |                                 |                                   |

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 an address, with all other like empowered.

SIGNATURE:

**Seth Udasin** **Seth Udasin**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/29/00**

Date

**201-558-2409**

Daytime Phone #

CR2E031 (1-1)

THE CHILDREN'S PLACE RETAIL STORES, INC.

Attachment  
D# 120089  
0068201

FEDERAL ID# 31-1241495

OFFICERS:

|                  |                                   |                                              |
|------------------|-----------------------------------|----------------------------------------------|
| POSITION VACANT  | PRESIDENT                         |                                              |
| MARIO CIAMPI     | VICE PRESIDENT                    | 915 SECAUCUS ROAD<br>SECAUCUS, NJ 07094-2409 |
| STEVEN BALASIANO | SECRETARY                         | 915 SECAUCUS ROAD<br>SECAUCUS, NJ 07094-2409 |
| SETH UDASIN      | TREASURER/<br>ASSISTANT SECRETARY | 915 SECAUCUS ROAD<br>SECAUCUS, NJ 07094-2409 |

DIRECTORS:

|                     |                                                                                              |
|---------------------|----------------------------------------------------------------------------------------------|
| STANLEY SILVERSTEIN | C/O NINA FOOTWEAR CORP<br>730 5TH AVENUE, 8TH FLOOR<br>NEW YORK, NY 10019                    |
| EZRA DABAH          | C/O THE CHILDREN'S PLACE RETAIL STORES, INC.<br>915 SECAUCUS ROAD<br>SECAUCUS, NJ 07094-2409 |
| SALLY FRAME KASAKS  | C/O THE CHILDREN'S PLACE RETAIL STORES, INC.<br>915 SECAUCUS ROAD<br>SECAUCUS, NJ 07094-2409 |
| DAVID ODDI          | C/O SAUNDERS KARP & CO.<br>667 MADISON AVENUE<br>NEW YORK, NY 10021                          |
| JOHN MEGRUE         | C/O SAUNDERS KARP & CO.<br>667 MADISON AVENUE<br>NEW YORK, NY 10021                          |