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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P29821

THE WET SEAL, INC.

FILED
May 04, 1999 8:00 am
Secretary of State
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05-04-1999 90190 010 \*\*\*150.00



Principal Place	of Business	Mailing Address				i					
26972 BURBANK		26972 BURBANK									
FOOTHILL RANK	CH CA 92610	FOOTHILL RANCH CA 92160 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed					
US											
						06/19/1990	Qualica				
2 0:-:-10		22 Mailing Address				4. FEI Number			Anal	ied For	
Z. Principal Pi	ace of Business	2a. Mailing Address									
21		26				00 01100 10					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired					
22		City 8 Ctata				A 51 11 5 1 5	· ·		<u>-</u> -		
City & State		City & State				,	6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
23	Country	28 Zin	Cou	ntn (		<del></del>			200 10	1 663	
Zip		<u> </u>	Zip Country			8. This corporation owes the current year Intangible Personal Property Tax Yes No					
24	25	29	30	1		Personal Property Ta 10. Name and Address					
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address	Ol Hem Kegistered A	.gent			
CSC				۱۳۱	Name						
	HAYS			82	Street Ad	ldress (P.O. Box Number is N	ot Acceptable)				
IALL	. FL 32301			83							
				84	City			85	Zip Co	ode	
				1	-		FL.		·		
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 607.1508, Florida Sta	atutes, the al	bove-	named co	progration submits this statement	ent for the purpose of o	:hangin	g its re	egistered stered	
office or re agent. I a	egistered agent, or both, in the State o m familiar with, and accept the obligati	or Florida. Such change wa ions of, Section 607.0505,	is authorized Florida Stati	າຍy ແ utes.	ne corpora	Ition's board or directors. The	eby accept the appoint	unent e	is rogic	010100	
-	,										
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (N	OTE: Registered	Agent	signature requ	uired when reinstating)	DATE				
12.	OFFICERS ANI	D DIRECTORS	13.			ADDITIONS/CHANGE	S TO OFFICERS ANI				
TITLE	PD	☐ DELETE 1.1		1.1 TITLE				Cha	nge	☐ Addition	
NAME	THOMAS, EDMOND		1.2 NA	AME							
STREET ADDRESS	8 SKYLARK WAY		1.3 ST	REET A	ADDRESS						
CITY-ST-ZIP	COTO DE CAZA CA		1.4 Cl	TY-ST-	ZIP						
TITLE	CEO	☐ DELETE	2.1 TI	TLE				☐ Cha	nge	☐ Addition	
NAME	BRONSTEIN, KATHY		2.2 N	AME							
STREET ADDRESS	ACCOUNT OF THE PARTY OF THE PAR		2.3 \$1	2.3 STREET ADDRESS							
	FOOTHILL RANCH CA 92610			ITY-ST							
CITY-ST-ZIP	SD SD	DELETE						Cha	inge	Addition	
TITLE	GROSS, STEPHEN		3.2 N/					_			
NAME	•				ADDRESS						
STREET ADDRESS	4341 WESTMONT AVE										
CITY-ST-ZIP	WESTMONT, QUEBEC CAN	□ DELETE		ITY-ST	- ZIP			[□] Cha	ange	Addition	
TITLE	CFOV								<b>3</b> -		
NAME	CADIER, KIM ANN		4. 2 N								
STREET ADDRESS	25972 BURBANK				ADDRESS						
CITY-ST-ZIP	FOOTHILL RANCH CA 92610			TY-ST-			<u> </u>			NEW AUGUST	
TITLE	D	☐ DELETE				C		Cha	nge	Addition	
NAME	TEITELBAUM, IRVING		5.2 N								
STREET ADDRESS	789 LEXINGTON AVE		5.3 S1	TREET	ADDRESS						
CITY-ST-ZIP	WESTMONT, QUEBEC CAN			TY-ST-	-ZIP						
TITLE	D	☐ DELETE	6.1 T	TLE				Cha	ınge	☐ Addition	
NAME	BENTER, GEORGE H., JR.		6.2 N	AME							
STREET ADDRESS	840 BELLIFONTANE PL		6.3 ST	TREET	ADDRESS						
CITY OT 710	PASADENA CA		6.4 CI	ITY-ST-	-ZIP						

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 afinual 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 justee 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 attacument with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF