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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED May 07 1998 8:00am Secretary of State

1. Corporation Name CARLTON CARDS RETAIL, INC. Principal Place of Business ONE AMERICAN RD OLEVELAND OH 44144 CLEVELAND OH 44144									
								DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified 08/06/1990	
	2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For	
21				26				06-0858911 Not Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
	City & State			City & State				Fee Required 6. Election Campaign Financing \$5.00 May Ba	
23	= '			28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
zi	р		Country	Zip		Country		8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Address of Curre		29	30			Personal Property Tex due June 30. Yes No		
	COL		N SERVICE COMPA			81	Name	10. Name and Address of New Registered Agent	
		1 HAYS ST		441					
			FL 32301-2525			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
		- .				83			
						84	City	■■ 85 Zip Code	
							FL **		
	office or re agent. I am	o t ne provisio g iste red age n fam iliar with	ons of Sections 607.05 ant, or both, in the Sta h, and accept the obl	502 and 607.1508, Flor ite of Florida. Such cha igations of, Section 607	da Statulos nge was au .0505, Flori	s, the above ithorized by ida Statutes	e-named co the corpor s.	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	
	S	ignature, typed o	r printed name of registered a		(NOTE:	Registered Age	nt signature rec	quired when reinstating) DATE	
12.		Б	OFFICERS A	ND DIRECTORS	ELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	PORTMAN, ROBERT		□ ¹	LLCIC	1.1 TITLE 1.2 NAME		Change Addition		
	EET ADDRESS ONE AMERICAN ROAD			1.3 STREET ADDRESS		ADDRESS			
	Y-ST-ZIP CLEVELAND OH 44144			1.4 CITY-S1-ZIP		1			
TITLE		VP		□ Đ	ELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	İ		PATRICIA			2.2 NAME			
STREET	ADDRESS	-	ERICAN ROAD			2.3 STREET	ADDRESS		
CITY-S	T-ZIP	CLEVELA	ND OH	····		2 4 CłTY-S	T-ZIP		
TITLE NAME		WEISS, A	MORRY	☐ D	LLEIE	3.1 TITLE 3.2 NAME		Change Addition	
	EET ADDRESS 1 AMERICAN ROAD					address			
	TY-ST-ZIP CLEVELAND OH			3.4. CIT					
TITLE	-	C		X/D	ELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME		MEYER, \				4. 2 NAME	-	· —	
STREET	ADDRESS		ERICAN ROAD			4.3 STREET	ADDRESS		
CITY-S	T-ZIP	CLEVELA	NU UH			4.4 CITY - ST	- ZIP		
TITLE		CARLE	AIF A	□ D	LEIE	5.1 TITLE		Change Addition	
NAME CABLE, DALE A. STREET ADDRESS 1 AMERICAN		ERICAN ROAD			5.2 NAME				
CITY-ST-ZIP CLEVELAND OH			5.3 STREET ADDRESS 5.4 City - St - Zip						
TITLE	. 411	8		Di	LETE	6.1 TITLE	- 417	☐ Change ☐ Addition	
NAME			NGER, JON JR.			6.2 NAME		- Charles	
STREET	ADDRESS	_	RICAN RD			6.3 STREET	ADDRESS		
CITY-SI	1-71P	CLEVELA	ND OH 44144			6.4 CITY - ST	- ZIP		

r nereby 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 truslee 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 an address.