

(251)

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May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000048956 (4)**

1. Corporation Name

BURLINGTON COAT FACTORY WAREHOUSE OF CORAL SPRING, INC.

Principal Place of Business

**1830 ROUTE 130
BURLINGTON NJ 08016**

Mailing Address

**1830 ROUTE 130
BURLINGTON NJ 08016**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1994

4. FEI Number

65-0505760

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00 May Be
Added to Fees**8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 BURLINGTON COAT FACTORYSuite, Apt. #, etc. **% TAX DEPT.**

City & State

23

Zip

Country

24

2a. Mailing Address

26 BURLINGTON COAT FACTORYSuite, Apt. #, etc. **% TAX DEPT.**

City & State

28

Zip

Country

29

9. Name and Address of Current Registered Agent

**REINSTEIN, ROBERT
C/O BURLINGTON COAT FACTORY
12801 W. SUNRISE BLVD.
SUNRISE FL 33323**

81 Name

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

83

84 City

FL

85

Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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 Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETENAME **MILSTEIN, MONROE C**STREET ADDRESS **1830 ROUTE 130 N**CITY-ST-ZIP **BURLINGTON NJ**TITLE **D** ☐ DELETENAME **MILSTEIN, ANDREW**STREET ADDRESS **1830 ROUTE 103 N**CITY-ST-ZIP **BURLINGTON FL**TITLE **DYS** ☐ DELETENAME **MILSTEIN, HENRIETTA**STREET ADDRESS **1830 ROUTE 130 N**CITY-ST-ZIP **BURLINGTON NJ**TITLE **D** ☐ DELETENAME **LA PENTA, ROBERT**STREET ADDRESS **1830 ROUTE 130 N**CITY-ST-ZIP **BURLINGTON NJ**TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**DIRECTOR / SECRETARY
MILSTEIN, ANDREW
1830 ROUTE 130 N.
BURLINGTON, N.J. 08016**
3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

**CHIEF FINANCIAL OFFICER
LA PENTA, ROBERT
1830 ROUTE 130 N.
BURLINGTON, N.J. 08016**
5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

**DIRECTOR / TREASURER
MILSTEIN, STEPHEN
1830 ROUTE 130 N.
BURLINGTON, N.J. 08016**
6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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 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 an address.

SIGNATURE

C.F.D.

4-20-98

101-387,800

CR2E034 (10/97)