

(261)
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
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 # **P94000059627 (7)**
1. Corporation Name
BURLINGTON COAT FACTORY WAREHOUSE OF HILAIEAH, I NC.

Principal Place of Business 1830 ROUTE 130 C/O TAX DEPARTMENT BURLINGTON NJ 08016 US	Mailing Address 1830 ROUTE 130 C/O TAX DEPARTMENT BURLINGTON NJ 08016 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30		3. Date Incorporated or Qualified 08/12/1994	
				4. FEI Number 65-0518823	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent REINSTEIN, ROBERT % BURLINGTON COAT FACTORY 12801 W. SUNRISE BLVD. SUNRISE FL 33323				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	

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 the, if applicable, (Not) Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILSTEIN, MONROE	1.2 NAME	
STREET ADDRESS	1830 ROUTE 130 N	1.3 STREET ADDRESS	
CITY-ST-ZIP	BURLINGTON NJ	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILSTEIN, ANDREW	2.2 NAME	DIRECTOR / SECRETARY
STREET ADDRESS	1820 ROUTE 130 N	2.3 STREET ADDRESS	MILSTEIN, ANDREW
CITY-ST-ZIP	BURLINGTON NJ	2.4 CITY-ST-ZIP	1830 ROUTE 130 N.
TITLE	DTS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILSTEIN, HENRIETTA	3.2 NAME	
STREET ADDRESS	1830 ROUTE 130 NORTH	3.3 STREET ADDRESS	
CITY-ST-ZIP	BURLINGTON NJ	3.4 CITY-ST-ZIP	
TITLE	LA PENTA, ROBERT	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1830 ROUTE 130 S	4.2 NAME	CHIEF FINANCIAL OFFICER
STREET ADDRESS	BURLINGTON NJ	4.3 STREET ADDRESS	LA PENTA, ROBERT
CITY-ST-ZIP		4.4 CITY-ST-ZIP	1830 ROUTE 130 N.
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	DIRECTOR / TREASURER
STREET ADDRESS		5.3 STREET ADDRESS	MILSTEIN STEPHEN
CITY-ST-ZIP		5.4 CITY-ST-ZIP	1830 ROUTE 130 N.
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 _____

CR2E034 (10/97)