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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 13 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P95000047878 (0)

BED BATH & BEYOND OF CARROLLWOOD INC.

Principal Place of Business Mailing Address 650 LIBERTY AVE 650 LIBERTY AVE **UNION NJ 07083** UNION NJ 07083 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/20/1995 2. Principal Place of Business Mailing Address Applied For 22-3394763 Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due Jurie 30. Yes 25 29 30 24 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 105 83 TALLAHASSEE FL 32301-2525 84 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 Horida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, typed or printed name of registered riginit and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Ø9 Addition Change DELETE 1.1 THILE TITLE **EISENBERG. WARREN** 1.2 NAME NAME **650 LIBERTY AVE** 1.3 STREET ADDRESS STREET ADDRESS **UNION NJ** CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition □ DELETE **Change** VĎ 2.1 TITLE vsD TITLE FEINSTEIN. LEONARD NAME 22 NAME 110 BI COUNTY BLVD. STREET ADDRESS 2.3 STREET ADDRESS **FARMINGDALE NY 11735** CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition TITLE 31 11TLE **CURWIN, RONALD** NAME 3.2 NAME 650 LIBERTY AVE STREET ADDRESS 3.3 STREET ADDRESS **UNION NJ** CITY-ST-ZIP 3 4. CiTY-ST-ZIP JIAS Change Addition DELETE TITLE 41 TITLE NAME 4 2 NAME sweie'Q STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-SI-ZIP DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE

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 eath; 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 charged, or on an attachment with an address.