

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLOIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000084336 (3)**

1. Corporation Name

COOL J'S FACTORY OUTLET, INC.



Principal Place of Business

**581 N.E. 79TH STREET
MIAMI FL 33138**

Mailing Address

**581 N.E. 79TH STREET
MIAMI FL 33138**

3. Date Incorporated or Qualified
11/02/1995

3a. Date of Last Report

4. FEI Number

65-062 2201

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 has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 County

29

30

9. Name and Address of Current Registered Agent

**RYDZ, MANUEL
581 N.E. 79TH STREET
MIAMI FL 33138**

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 applicant)

Signature (Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** DELETE
NAME **RYDZ, MANUEL**
STREET ADDRESS **581 N.E. 79TH STREET**
CITY - ST - ZIP **MIAMI FL 33138**

TITLE **VD** DELETE
NAME **COHEN, SALAMON A**
STREET ADDRESS **581 N.E. 79TH STREET**
CITY - ST - ZIP **MIAMI FL 33138**

TITLE **STD** DELETE
NAME **RYDZ, RAQUEL**
STREET ADDRESS **581 N.E. 79TH STREET**
CITY - ST - ZIP **MIAMI FL 33138**

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

11 TITLE Change Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE Change Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Raquel Ryz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)