**FILED** 

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90159 041 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700046150

1. Corporation Name

RETAIL HOLDINGS HUNGARY, INC.

Principal Plac	e of Business	Mailing Address	Mailing Address				321 00111 00114 0	1864 AISAN 11861 I	Altij AAlt Skat	
4675 SW 74TH	i ST	4675 SW 74TH ST							•	
MIAMI FL 3314	3	MIAMI FL 33143	MIAMI FL 33143			DO NOT WRITE IN THIS SPACE				
•	المن <b>سب</b> . و المالي ا	مني السوفتان منستات و		-		3. Date Incorporated or Qualifed				1
						05/23/1997		•		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	·	Apr	olied For	1
21		26	26					Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				65-0766904  5. Certificate of Status Desired		\$8.75 A		
22		27				U. Octalodic of States Desired		Fee Re	quired	1
City & Stat	te :	City & State				6. Election Campaign Financing		\$5.00		
23		<del> </del>	28			Trust Fund Contribution Added to Fees				
Zip Country		<b>⊢</b>	Zip Country			8. This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax. Yes No  10. Name and Address of New Registered Agent				
	9. Name and Address of Curr	rent Registered Agent	-	81 Name	•	To. Haine and Address of New P	registered /	- Sein		1
FAR	R, VERONICA									
-	5 SW 74TH ST		82 Street Add			ddress (P.O. Box Number is Not Acceptable)				
	MI FL 33143		}	83						1
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		• •		_		•				
				84 City			EI	85 Zip C	Code	
office or r	registered agent, or both, in the Sta im familiar with, and accept the obl	ate of Florida. Such change was a ligations of, Section 607.0505, Flo	uthorized rida Statu	by the cor tes.	poration 	ration submits this statement for the 's board of directors. I hereby accep	of the appoir	itment as reg	gistered	
Signature. typed or printed name of registered agent and title if applicable. (NOTE: 12. OFFICERS AND DIRECTORS			: Registered	Agent signatur	Peniuper i	when reinstating) ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12	ĺ
TITLE	VCOC	DELETE	1.1 TIT	F ~	To	7,000,000,000,000		Change	Addition	3
NAME	POTAMKIN, ROBERT M		1.2 NA			ronica Farr			- <u>x</u>	3
STREET ADDRESS	130 SPRUCE ST, SUITE 30B			1.3 STREET ADDRESS 4		75 SW 74th ST.				8
CITY-ST-ZIP	PHILADELPHIA PA 19106	_		Y-ST-ZIP	Mi	ámi, FL 33143				٥
TITLE	SCOC	☐ DELETE	2.1 TIT		1			Change	Addition	(
NAME	POTAMKIN, ALAN H		2.2 NA	ИE	}					1
STREET ADDRESS	144W MIN = 1711 AT		2.3 ST	REET ADDRES	s	•				
CITY-ST-ZIP	MIAMI FL 33143	•	2. 4 CI	Y-ST-ZIP					_	
TITLE	P	☐ DELETE	3.1 711					Change	☐ Addition	
NAME	LEPLEY, RICK A		3.2 NA	Æ						
STREET ADDRESS	A A SHOW A SHOULD AND		3.3 STI	3.3 STREET ADDRESS				•		
CITY-ST-ZIP	MIAMI FL 33143		3.4. CI	Y-ST-ZIP	l					
TITLE		☐ DELETE	4.1 717	E		-		Change	☐ Addition	
NAME			4.2 N	ME						1
STREET ADDRESS			4.3 STI	REET ADDRES	s					
CITY-ST-ZIP	·		4.4 CIT	Y-ST-ZIP					<del> </del>	1_
TITLE		DELETE	5.1 TIT			بە <del>نىقەتىپ، سېستەر</del> ى» — <del>ئىيىسىنىدى</del> بىلىن	<del>. ,</del>	Change	Addition	
NAME				2 NAME						
STREET ADDRESS				REET ADDRES	s			•		
CITY-ST-ZIP				5.4 CITY-ST-ZIP						1
TITLE		☐ DELETE	6.1 TIT					Change	☐ Addition	1
NAME			6.2 NA		_					
STREET ADDRESS	1		■ 63ST	REET ADDRES	5 I					1

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/filis 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 with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

Alan HOPOTAMKINE KE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

305-665-9600