DOCU 1. Entity Nan	MENT # P980000	024920		FILED Sep 18, 2000 8:00 a Secretary of State	ım ;	
Principal Place of Business 1830 ROUTE 130 N C/O TAX DEPARTMENT BURLINGTON NJ 08016 US		Mailing Address 1830 ROUTE 130 N C/O TAX DEPARTMENT BURLINGTON NJ 08016 US		,	1 11 161 1	
Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State				4. FEI Number 59-3500908 Applied	For	
Zip	Country	Zip	Country	Not App 5. Certificate of Status Desired S8.75 Additional	olicable	
	6. Name and Address of Current F	legistered Agent	<u></u>	7. Name and Address of New Registered Agent		
			Name			
OLIVER, DON % BURLINGTON COAT FACTORY 12801 W. SUNRISE BLVD.			Street Addre	ress (P.O. Box Number is Not Acceptable)		
	NRISE FL 33323		City	FL Zip Code		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FEE IS \$550.00 After SEPTEMBER 13, 2000 Min. will be \$75 Make Check Payable to Department of Sta				
11.	OFFICERS AND D	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILSTEIN, MONROE G 1830 ROUTE 130 N BURLINGTON NJ 08016	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ A	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDVP MILSTEIN, ANDREW R 1830 ROUTE 130 N BURLINGTON NJ 08016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ A	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDVP MILSTEIN, STEPHEN E 1830 ROUTE 130 N BURLINGTON NJ 08016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ A	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO LAPENTA, ROBERT J 1830 ROUTE 130 N BURLINGTON NJ 08016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ A	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MILSTEIN, HENRIETTA 1830 ROUTE 130 N BURLINGTON NJ 08016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ A	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ A	Addition	
13. I hereby of indicated of the corr	on this report or supplemental report is t	rue and accurate and that n	the exemption stated in ny signature shall have t	in Section 119.07(3)(i), Florida Statutes. I further certify that the informathe same legal effect as if made under oath; that I am an officer or direct form of the form of t	ector	