

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000095424

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: JULMAD RETAIL SERVICES, INC.

## Current Principal Place of Business:

236-250 GREENPOINT AVENUE  
BROOKLYN, NY 11222 US

## New Principal Place of Business:

## Current Mailing Address:

PAVIA & HARCOURT  
600 MADISON AVENUE, 12TH FLOOR  
NEW YORK, NY 10025 US

## New Mailing Address:

FEI Number: 52-2129694      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SIEGLER, STEVEN  
Address: 236-250 GREENPOINT AVENUE  
City-St-Zip: BROOKLYN, NY 11222 US

Title: VPD ( ) Delete  
Name: MCLAUGHLIN, JAY  
Address: 236-250 GREENPOINT AVENUE  
City-St-Zip: BROOKLYN, NY 11222 US

Title: VPD ( ) Delete  
Name: MCLAUGHLIN, KEVIN  
Address: 236-250 GREENPOINT AVENUE  
City-St-Zip: BROOKLYN, NY 11222 US

Title: S ( ) Delete  
Name: RINGEL, JORDAN E  
Address: 600 MADISON AVENUE, 12TH FLOOR  
City-St-Zip: NEW YORK, NY 10022 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAUREEN MAHON

DIR

04/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date