

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S43695** (3)

1. Corporation Name

THE RAG SHOP/CORAL SPRINGS, INC.



Principal Place of Business

Mailing Address

**MAPLEWOOD PLAZA
1170 UNIVERSITY DR
CORAL SPRINGS FL 33071
US**

**THE RAG SHOP/CORAL SPRINGS, INC.
111 WAGARAW RD
HAWTHORNE NJ 07506
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

2a Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

3. Date Incorporated or Qualified

04/08/1991

3a. Date of Last Report

04/27/1995

4. FEI Number

65-0276103

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
SUITE 105
TALLAHASSEE FL 32301**

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 title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CDP
BERENZWEIG, STANLEY
111 WAGARAW RD. RAG SHOP
HAWTHORNE NJ**

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
**C/D
Change
HAWTHORNE, NJ 07506**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BERENZWEIG, DORIS
111 WAGARAW RD. RAG SHOP
HAWTHORNE NJ**

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
**Change
HAWTHORNE, NJ 07506**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
LOMBARDO, JUDITH
111 WAGARAW RD. RAG SHOP
HAWTHORNE NJ**

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
**Change
HAWTHORNE, NJ 07506**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BERENZWEIG, EVAN
111 WAGARAW RD. RAG SHOP
HAWTHORNE NJ**

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
**Change
HAWTHORNE, NJ 07506**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTD
BARNETT, STEVEN
111 WAGARAW RD. RAG SHOP
HAWTHORNE NJ**

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
**Change
HAWTHORNE, NJ 07506**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
**P/D
Change
AARONSON, MICHAEL
111 WAGARAW ROAD, RAG SHOP
HAWTHORNE, NJ 07506**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 25 1998

(201) 423-1303

Date

Daytime Phone #

CR2E034 (12/95)