SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** S94863 (5)Corporation Name CLOSET GALLERY INTERNATIONAL INC. Principal Place of Business Mailing Address 3700 N.W. 124TH AVENUE 3700 N.W. 124TH AVENUE **BAY 129 BAY 129** CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 3. Date incorporated or Qualified 3a. Date of Last Report 11/18/1991 03/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0303902 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc **\$8.75** Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζφ Country Zip Country This corporation has liability for inlangible tax under s. 199 032 24 25 29 30 Yes 🔲 No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROTHSTEIN, LEONARD 3700 N.W. 124TH AVENUE Street Address (P.O. Box Number is Not Acceptable) **BAY 129** 83 **CORAL SPRINGS FL 33065** 84 City 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 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 Stgruture, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/3/6) TITLE DELETE 11 TITLE Change Addition NAME ROTHSTEIN, LEONARD 12 NAME CR2E034 STREET ADDRESS 3700 N.W. 124TH AVENUE 13 STREET ADDRESS **CORAL SPRINGS FL** CITY - ST - ZIP 1 4 CITY - ST - ZIP TITLE DELETE 21 THE Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY ST - ZIP TITLE DELETE 3 1 THTLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS. DITY-ST-ZIP 3.4 CITY-ST-ZIE TITLE | DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY - ST - ZIP 5.4 City - S1 - 2(P TITLE I DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - Z-P 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 1 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address

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SIGNATURE:

AND THE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR