## 597419

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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D.A. change

T BROWN JAN - 6 2003



ACCOUNT NO. : 072100000032

REFERENCE: 868782 4720431

AUTHORIZATION T

COST LIMIT : \$ 35.00

ORDER DATE: December 23, 2002

ORDER TIME : 12:18 PM

ORDER NO. : 868782-940

CUSTOMER NO: 4720431

CUSTOMER: Ms. Tina Grodziski

Charming Shoppes, Inc.

450 Winks Lane

Bensalem, PA 190200000

## CHANGE OF AGENT

NAME: FASHION BUG #2919, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Ta-tanisha Adams -- EXT# 1131

EXAMINER:



## FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

RECEIVED

03 JAN -6 AM 8:59

DIVISION OF CORPORATION

January 3, 2003

CSC TA-TANISHA ADAMS TALLAHASSEE, FL

SUBJECT: FASHION BUG #2919, INC.

Ref. Number: S97419

RESUBMIT

Please give original phonesion date as tite date.

We have received your document for FASHION BUG #2919, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown Document Specialist

Letter Number: 903A00000327

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		517.0502, 607.1508, or 617.1508, Florida Statutes	5,
this statement	of change is submitted for a corporat	ion organized under the laws of the State of	
Florida in order to change its registered office or registered agent, or both, in the State			
of Florida.			
1. The name of the corporation: FASHION BUG #2919, INC.			
2. The principa	al office address:		
1200 S. Pi	ine Island Road, Plantation, FL 3	3324	
3. The mailing	address (if different): 450 Winks Lan	e, Corporate Tax, Bensalem, PA 19020	
4. Date of inco	orporation/qualification: December 02	, 1991 Document number: 597419	
	nd street address of the current register artment of State:	ered agent and registered office on file with the	
	C T Corporation System		~
	1200 South Pine Island Road		-
	Plantation, FL 33324		7
6. The name and street address of the new registered agent (if changed) and /or registered office (If changed):			
	Corporation Service Company		
	1201 Hays Street (P.O. Box or personal m	ailbox NOT acceptable)	
	Tallahasses, FL 32301		
		treet address of the business office of its registered	1
Such change vauthorized by	was authorized by resolution duly ad the board, or the corporation has been	opted by its board of directors or by an officer so en notified in writing of the change.	
Signature plan office	cor, chairman or vice chairman of the board)	Maureen Cullen, Attorney-in-Fact (Printed or typed name and title)	
I furthér agrêd performance d registered age	of my duties, and I am familiar with ent. Or. if this document is being file	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as ed merely to reflect a change in the registered on has been notified in writing of this change.	
Mupu	eline M. Gillet	December 31, 2002	
If signing on bel	(Signature of Registered Agent) nalf of an entity:	(Date)	
Jacqueline M		Assistant Vice President	, .
	(Typed or Printed Name)	(Capacity)	5 - 7

\* \* \* FILING FEE: \$35.00 \* \* \*