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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V02111

(5)

BURLINGTON COAT FACTORY WAREHOUSE OF ORLANDO, IN

FILED May 06 1998 8:00am Secretary of State



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|---|-----------------------------------|---------------------------------------|---------------------------------------|--|---------------|---------|---------------------------------------|---|---|--|--------------------|-----------|-------------|----------------|----------|--|
| Principal Place of Business Mailing Address | | | | | | | | | | | (1181 81811 81813 | 41411 911 |))(W(W)(| 81811 (88) | | |
| 1830 ROUTE 130 NORTH | | | | 1830 ROUTE 130 NORTH | | | | | | | | | | | | |
| C/O TAX DEPT. BURLINGTON NJ 08016 | | | C/O TAX DEPT. Burlington nj 08016 | | | | | DO NOT WRITE IN THIS SPACE | | | | | | | | |
| US | | | US | | | | | 3. | | ncorporated or Qualifie | | - | | | ٦ | |
| | | | · · · · · · · · · · · · · · · · · · · | | | | | | | 4/1991 | | | | | ╛ | |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | 4. | 4. FEI Number | | | | Applied For | | | |
| 21 | | | | 26 | | | | | 58-1976042 | | | | | Not Applicable | | |
| Suite, Apt. #, etc. | | | | Suite, Apt #, etc. | | | | 5. | Certific | ate of Status Desired | | - | | dditional | | |
| City & State | | | | City & State | | | | | Clastic | - Caranian Financian | <u>.</u> | | | | \dashv | |
| 23 | | | 28 | | | | 6. | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | | | | | | |
| Zip | Country | | | Zip Cou | | | | 8. | | prporation owes or has | paid the curi | | | | ┪ | |
| 24 | 25 | | | 29 30 | | | | | Personal Property Tax due June 30. Yes No | | | | | | | |
| | | ddress of Current I | Regist | ered Agent | | | | 10. | Name | and Address of New | Registered / | gent | | | \Box | |
| | INSTEIN, ROBER | | | | | 81 | Name | | | | | | | | 1 | |
| C/O BURLINGTON COAT FACTORY | | | | | | | Street | Address (F | O. Box | Number is Not Accep | table) | | | | ┪ | |
| 12801 W, SUNRISE BLVD. Sunrise Fl. 33323 | | | | | | 83 | | | | | <u> </u> | | | | 4 | |
| 30 | INNIBE FL 33323 | | | | | 63 | | | | | | | | | İ | |
| | | | | | | 84 | City | | | | FL | 85 | Zip C | ode | ٦ | |
| 11. Pursuant | to the provisions of | Sections 607.0502 | and 60 | 7 1508 Florida Statut | es the a | bove | -nameo | Corporatio | n submi | its this statement for the | | chanc | ina its | registered | H | |
| office or a | registered agent, or | both, in the State of | Florida | a. Such change was a Section 607 0505. Ele | authorize | d by | the cor | poration's t | oard of | its this statement for the directors. I hereby acc | cept the app | ointme | nt as i | registered | | |
| SIGNATURE | | . dosopie mo obnigatio | 01, | 0.000, 110 | orida ota | lutos | | | | | | | | | | |
| | Signature, typed or printe | diname of registered agent a | | | l · Registere | d Age | nt signature | required when | | | DATE | | | | | |
| 12. | T DP | OFFICERS AND I | DIREC. | 2/10 | 13. | | | <u> </u> | ADDITIO | NS/CHANGES TO OF | | | | | | |
| TITLE | - , | NDOE | | DELETE | 1.1 (1 | | | | | | | ☐ Ch | ange | Addition |] [| |
| NAME STREET ADDRESS | MILSTEIN, MONROE 1830 ROUTE 130 N | | | 1.2 N | | | 4000000 | ļ | | | | | | | | |
| | BURLINGTON NJ | | | | | | 1.3 STREET ADDRESS 1.4 City-S1-Zip | | | | | | | | Ì | |
| CITY-ST-ZIP TITLE | D | | | DELETE | 2.1 TI | | 1 - ZIP | | | | | Chi | anne | Addition | -18 | |
| NAME | MILSTEIN, AN | DREW | | La oracia | 22 N | | | | | | | | ingc | Kadillon | Ί | |
| STREET ADDRESS | 1830 ROUTE | | | | | | ADDRESS | İ | | | | | | | | |
| CITY-ST-ZIP | BURLINGTON | NJ | | | | HTY-S | | | | | | | | | | |
| TITLE | DS | · · · · · · · · · · · · · · · · · · · | | DELETE | 3.1 Ti | | | | | | | Ch: | ange | Addition | ╗ | |
| NAME | MILSTEIN, HE | | | | 3.2 N | AME | | | | | | | | - | | |
| STREET ADDRESS | 1830 ROUTE | | | | 3.3 \$ | TREET | ADDRESS | 1 | | | | | | | | |
| CITY-ST-ZIP | BU RLINGTON | NJ | | | 3.4. C | ITY - S | 1-ZIP | <u> </u> | | | | | | | | |
| TITLE | T ANI OPPOS | AIDIPTTA | | DELETE | 4.1 1 | TLE | | | | | | Cha | ange | Addition | \neg | |
| NAME | MILSTEIN, HE | | | | 4.2 N | AME | | 1 | | | | | | | | |
| STREET ADDRESS | PHOUSIGTON N.I. | | | | | | ADDRESS | | | | | | | | | |
| CITY-ST-ZIP | CFO | ITJ | | T or ere | | TY-ST | - ZIP | <u> </u> | | | | K Z | | | _ | |
| TITLE | LA PENTA, RO | NEEDT | | ☐ DELETE | 5.1 YI | | | ہے ہا | | 00000 | | Cha | inge | ☐ Addition | 1 | |
| NAME | 1830 ROUTE | | | | 5.2 N | | | LA PE | MA | ROBERT | | | | | | |
| STREET ADDRESS | BURLINGTON | | | | | | ADDRESS | | • | | | | | | | |
| CITY-ST-ZIP TITLE | PONLINGI ON | | | DELETE | 4 | TY-SI | - ZiP | | | | | 76 | 10.00 | A addition | - | |
| NAME | | | | C DETELE | 6.1 TI | | | | | | | Cha | របើជ | Addition | | |
| STREET ADDRESS | | | | | 6.2 N/ | | Annoree | ļ | | | | | | | | |
| | | | | | | | ADDRESS | | | | | | | | | |
| CITY-ST-ZIP | | | | | 6.4 U | TY-ST | - 211 | L | | | | | | | _1 | |

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 chapter 607, or on an attachment with an address.