



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>86348</b>		2. Name of Corporation <b>Retail Brand Alliance, Inc.</b>			
3. Street Address Principal Business Office <b>100 Phoenix Ave</b>			City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
4. Business Phone No <b>(860) 741-0771</b>		5. State of Incorporation <b>DELAWARE</b>			6. SIC Code <b>3913</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>RETAIL-WOMEN'S APPAREL</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Claudio Del Vecchio</b>			Vice President Name <b>Eugene Feola</b>		
Street Address <b>100 Phoenix Ave.</b>			Street Address <b>100 Phoenix Ave.</b>		
City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>	City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
Secretary Name <b>Eugene Feola</b>			Treasurer Name <b>Brian Baumann</b>		
Street Address <b>100 Phoenix Ave.</b>			Street Address <b>100 Phoenix Ave.</b>		
City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>	City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Claudio Del Vecchio</b>			Director Name <b>Eugene Feola</b>		
Street Address <b>100 Phoenix Ave.</b>			Street Address <b>100 Phoenix Ave.</b>		
City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>	City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,501,000 \$0.01 PAR VALUE</b>			<b>1,147,698.44</b>	<b>Common</b>	<b>.01</b>
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\*86348\*

File Date 1-18-05  
Check No. 0075074  
By: 2

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

**Brian Baumann**  
Print or Type Name of Officer

**Treasurer / CFO**  
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

471  
Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

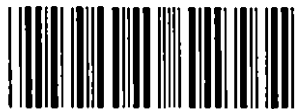
**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>86348</b>		2. Name of Corporation <b>Retail Brand Alliance, Inc.</b>			
3. Street Address Principal Business Office <b>100 Phoenix Ave</b>			City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
4. Business Phone No. <b>(860) 741-0771</b>		5. State of Incorporation <b>DELAWARE</b>			6. SIC Code <b>3913</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>RETAIL-WOMEN'S APPAREL</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Claudio DelVecchio</b>			Vice President Name <b>Eugene Feola</b>		
Street Address <b>100 Phoenix Ave</b>			Street Address <b>100 Phoenix Ave</b>		
City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>	City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
Secretary Name <b>Eugene Feola</b>			Treasurer Name <b>Brian Baumann</b>		
Street Address <b>100 Phoenix Ave</b>			Street Address <b>100 Phoenix Ave</b>		
City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>	City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Claudio DelVecchio</b>			Director Name <b>Eugene Feola</b>		
Street Address <b>100 Phoenix Ave</b>			Street Address <b>100 Phoenix Ave</b>		
City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>	City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
Director Name <b>Mark Shulman</b>			Director Name <b>Carolee Friedlander</b>		
Street Address <b>100 Phoenix Ave</b>			Street Address <b>100 Phoenix Ave</b>		
City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>	City <b>Enfield</b>	State <b>CT</b>	Zip <b>06082</b>
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>1,501,000</b>	<b>\$.01 PAR VALUE</b>		<b>1,147,698.44</b>	<b>Common</b>	<b>.01</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 6 3 4 8 \*

File Date 2-13-04  
Check No. 603489  
By: Or

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Brian Baumann 2/4/04  
Signature of Officer Date

Brian Baumann  
Print or Type Name of Officer

Treasurer / CFO  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

86348

2. Name of Corporation

Retail Brand Alliance, Inc.

3. Street Address Principal Business Office

100 PHOENIX AVE

City

ENFIELD

State

CT

Zip

06082

4. Business Phone No.

(860) 741-0771

5. State of Incorporation

DELAWARE

6. SIC Code

3913

7. Brief Description of the Character of Business Conducted in Rhode Island

RETAIL WOMENS APPAREL & ACCESSORIES

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

CLAUDIO DELVECCHIO

Vice President Name

EUGENE FEOLA

Street Address

100 PHOENIX AVE

Street Address

100 PHOENIX AVE

City

ENFIELD

State

CT

Zip

06082

City

ENFIELD

State

CT

Zip

06082

Secretary Name

EUGENE FEOLA

Treasurer Name

BRIAN BAUMANN

Street Address

100 PHOENIX AVE

Street Address

100 PHOENIX AVE

City

ENFIELD

State

CT

Zip

06082

City

ENFIELD

State

CT

Zip

06082

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

CLAUDIO DELVECCHIO

Director Name

EUGENE FEOLA

Street Address

100 PHOENIX AVE

Street Address

100 PHOENIX AVE

City

ENFIELD

State

CT

Zip

06082

City

ENFIELD

State

CT

Zip

06082

Director Name

MARK SHULMAN

Director Name

CAROLEE FRIEDLANDER

Street Address

100 PHOENIX AVE

Street Address

100 PHOENIX AVE

City

ENFIELD

State

CT

Zip

06082

City

ENFIELD

State

CT

Zip

06082

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,501,000 \$.01 PAR VALUE

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

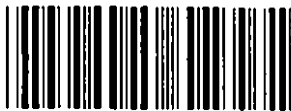
Par Value

1,147,698.44

Common

.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 6 3 4 8 \*

File Date: 2/20/03

Check No.: 0026779

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2/11/03  
Signature of Officer Date

BRIAN BAUMANN  
Print or Type Name of Officer

TREASURER/CFO  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

86348

2. Name of Corporation

Retail Brand Alliance, Inc.

3. Street Address Principal Business Office

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

4. Business Phone No.

(860) 741-0771

5. State of Incorporation

DELAWARE

6. SIC Code

3913

7. Brief Description of the Character of Business Conducted in Rhode Island

Retail Women's Apparel

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Claudio Del Vecchio

Street Address

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

Vice President Name

Eugene Feola

Street Address

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

Secretary Name

Eugene Feola

Street Address

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

Treasurer Name

Brian K. Baumann

Street Address

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Claudio Del Vecchio

Street Address

100 Phoenix Avenue, P.O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

Director Name

Eugene Feola

Street Address

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

Director Name

Mark Shulman

Street Address

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

Director Name

Carolee Friedlander

Street Address

100 Phoenix Avenue, P. O. Box 1700

City

Enfield

State

CT

Zip

06083-1700

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,501,000 \$.01 PAR VALUE

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

1,147,698.44

Common

\$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 6 3 4 8 \*

File Date: 2/21/02

Check No.: 468986

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that the statements contained herein are true and correct.

Signature of Officer

Date

Brian K. Baumann

Print or Type Name of Officer

Treasurer

Title of Officer

5

Form 630 12/01

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **86348** 2. Name of Corporation **CASUAL CORNER GROUP, INC.**

3. Street Address Principal Business Office  
**100 Phoenix Avenue, P. O. Box 1700**  
City **Enfield** State **CT** Zip **06083-1700**  
4. Business Phone No. **(860)741-0771** 5. State of Incorporation **DELAWARE** 6. SIC Code **5913**

7. Brief Description of the Character of Business Conducted in Rhode Island

**Retail Women's Apparel**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

**Claudio Del Vecchio**

Street Address

**100 Phoenix Avenue**

City **Enfield** State **CT** Zip **06083**

Secretary Name

**Eugene Feola**

Street Address

**100 Phoenix Avenue**

City **Enfield** State **CT** Zip **06083**

Vice President Name

**Eugene Feola**

Street Address

**100 Phoenix Avenue**

City **Enfield** State **CT** Zip **06083**

Treasurer Name

**Brian Baumann**

Street Address

**100 Phoenix Avenue**

City **Enfield** State **CT** Zip **06083**

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

**Claudio Del Vecchio**

Street Address

**100 Phoenix Avenue**

City **Enfield** State **CT** Zip **06083**

Director Name

**Eugene Feola**

Street Address

**100 Phoenix Avenue**

City **Enfield** State **CT** Zip **06083**

Director Name

**Mark Shulman**

Street Address

**100 Phoenix Avenue**

City **Enfield** State **CT** Zip **06083**

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES

Number of Shares **2,000** Class/Series **\$.01** Par Value **PAR VALUE**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES

Number of Shares **812.75** Class/Series **Common** Par Value **\$.01**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 6 3 4 8 \*

File Date: 3/1

Check No.: 427494

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2/26/01  
Signature of Officer Date

BRIAN BAUMANN  
Print or Type Name of Officer

TREASURER  
Title of Officer

CORP ID# 86348

**OFFICERS AND DIRECTORS OF  
CASUAL CORNER GROUP, INC.**

*Business Address*  
**100 Phoenix Avenue  
Enfield, CT 06082**

as of January 15, 2001

<u>Name</u>	<u>Officer/Director</u>
Claudio Del Vecchio 100 Phoenix Avenue Enfield, CT 06082	Chairman of the Board, President, Chief Executive Officer and Director
Mark Shulman 100 Phoenix Avenue Enfield, CT 06082	Chief Operating Officer Director
Brian Baumann 100 Phoenix Avenue Enfield, CT 06082	Chief Financial Officer Treasurer
Eugene Feola 100 Phoenix Avenue Enfield, CT 06082	Secretary Vice President Director
Roseann Rokosz 100 Phoenix Avenue Enfield, CT 06082	Assistant Secretary
Alan Paperny 100 Phoenix Avenue Enfield, CT 06082	Assistant Secretary

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **86348** 2. Name of Corporation **CASUAL CORNER GROUP, INC.**

3. Street Address Principal Business Office

City

State

Zip

100 Phoenix Avenue, P. O. Box 1700

Enfield

CT

06083-1700

4. Business Phone No.

5. State of Incorporation

6. SIC Code

(860)741-0771

DELAWARE

3913

7. Brief Description of the Character of Business Conducted in Rhode Island

Retail/Women's Apparel

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) **X FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

Vice President Name

Claudio Del Vecchio

Eugene Feola

Street Address

Street Address

100 Phoenix Avenue

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

Enfield

CT

06083

Secretary Name

Treasurer Name

Eugene Feola

Luciano Santel

Street Address

Street Address

100 Phoenix Avenue

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

Enfield

CT

06083

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

**FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

Director Name

Claudio Del Vecchio

Eugene Feola

Street Address

Street Address

100 Phoenix Avenue

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

Enfield

CT

06083

Director Name

Director Name

Mark Shulman

Street Address

Street Address

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

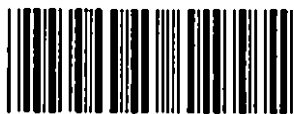
2,000 \$.01 PAR VALUE

812.75

Common Stock

\$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 6 3 4 8 \*

File Date: 2/18/00

Check No.: 385353

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Claudio Del Vecchio

Print or Type Name of Officer

President

Title of Officer

2/16/00  
Date

**OFFICERS AND DIRECTORS OF  
CASUAL CORNER GROUP, INC.**

*Business Address*

**100 Phoenix Avenue  
Enfield, CT 06082**

as of February 15, 2000

<u>Name</u>	<u>Officer/Director</u>
Claudio Del Vecchio 100 Phoenix Avenue Enfield, CT 06082	Chairman of the Board, President, Chief Executive Officer and Director
Luciano Santel 100 Phoenix Avenue Enfield, CT 06082	Co-Chief Operating Officer Treasurer
Mark Shulman 100 Phoenix Avenue Enfield, CT 06082	Co-Chief Operating Officer Director
Brian Baumann 100 Phoenix Avenue Enfield, CT 06082	Chief Financial Officer
Eugene Feola 100 Phoenix Avenue Enfield, CT 06082	Secretary Vice President Director
Alison Poitras 100 Phoenix Avenue Enfield, CT 06082	Assistant Secretary
Roseann Rokosz 100 Phoenix Avenue Enfield, CT 06082	Assistant Secretary
Alan Paperny 100 Phoenix Avenue Enfield, CT 06082	Assistant Secretary





STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **1999**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

88348

CASUAL CORNER GROUP, INC.

3. Street Address Principal Business Office

City

State

Zip

100 Phoenix Avenue

Enfield

CT

06083

4. Business Phone No.

5. State of Incorporation

6. SIC Code

(860) 741-0771

DELAWARE

3913

7. Brief Description of the Character of Business Conducted in Rhode Island

Retail/Women's Apparel

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Claudio Del Vecchio

Roberto Chemello

Street Address

Street Address

100 Phoenix Avenue

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

Enfield

CT

06083

Secretary Name

Treasurer Name

Eugene Feola

Roberto Chemello

Street Address

Street Address

100 Phoenix Avenue

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

Enfield

CT

06083

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

Leonardo Del Vecchio

Roberto Chemello

Street Address

Street Address

100 Phoenix Avenue

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

Enfield

CT

06083

Director Name

Director Name

Claudio Del Vecchio

Street Address

Street Address

100 Phoenix Avenue

City

State

Zip

City

State

Zip

Enfield

CT

06083

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

2,000 \$.01 PAR VALUE

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

812

Common Stock

\$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 6 3 4 8 \*

File Date: Jan 25, 99

Check No.: 00335069

By: ID

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

Claudio Del Vecchio

Print or Type Name of Officer

President

Title of Officer

**OFFICERS AND DIRECTORS OF  
CASUAL CORNER GROUP, INC.**

*Business Address*  
**100 Phoenix Avenue  
Enfield, CT 06082**

as of July 29, 1998

<u>Name/Residence Address</u>	<u>Officer/Director</u>
Leonardo Del Vecchio Vial, 10 3221 Agordo, Belluno Italy	Chairman of the Board and Director
Claudio Del Vecchio 3 Toboggan Pass Cold Spring Harbor, NY 11724	Vice Chairman of the Board, President, Chief Executive Officer and Director
Roberto Chemello Vial, 10 3221 Agordo Belluno Italy	Treasurer Executive Vice President Director
Luciano Santel V Marcon, 8 30174 Venezia Mestre Italy	Chief Operating Officer
Debra Del Vecchio 3 Toboggan Pass Cold Spring Harbor, NY 11724	Senior Vice President of Operations
Eugene Feola 22 Steeplechase Avon, CT 06001	Secretary Vice President



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

86348

2. Name of Corporation

Casual Corner Group, Inc.

3. Street Address Principal Business Office

100 Phoenix Avenue

City

Enfield

State

CT

Zip

06082

4. Business Phone No.

(860) 741-0771

5. State of Incorporation

Delaware

6. SIC Code

3913

7. Brief Description of the Character of Business Conducted in Rhode Island

Retail/Women's Apparel

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) XX

President Name

Claudio Del Vecchio

Vice President Name

Roberto Chemello

Street Address

100 Phoenix Avenue

Street Address

100 Phoenix Avenue

City

Enfield

State

CT

Zip

06082

City

Enfield

State

CT

Zip

06082

Secretary Name

Eugene Feola

Treasurer Name

Roberto Chemello

Street Address

100 Phoenix Avenue

Street Address

100 Phoenix Avenue

City

Enfield

State

CT

Zip

06082

City

Enfield

State

CT

Zip

06082

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name

Leonardo Del Vecchio

Director Name

Roberto Chemello

Street Address

100 Phoenix Avenue

Street Address

100 Phoenix Avenue

City

Enfield

State

CT

Zip

06082

City

Enfield

State

CT

Zip

06082

Director Name

Claudio Del Vecchio

Director Name

Street Address

Street Address

100 Phoenix Avenue

City

Enfield

State

CT

Zip

06082

City

State

Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

1,000

Common Stock

.01

1,000

Preferred Stock

.01

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

800

Common Stock

.01

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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date:

7/28/98

Check No.:

304853

By:

GA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Luciano Santel

Date

6/17/98

Print or Type Name of Officer

Chief Operating Officer / V.P.

Title of Officer

F. E. I. N. 51-0368883  
Corporate ID# 86348

**OFFICERS AND DIRECTORS OF  
CASUAL CORNER GROUP, INC.**

*Business Address:*  
**100 Phoenix Avenue  
Enfield, CT 06083**

Name/Residence Address

Officer/Director

Mr. Leonardo Del Vecchio  
Vial, 10 3221  
Agordo, Belluno  
Italy

Chairman of the Board  
and Director

Claudio Del Vecchio  
3 Toboggan Pass  
Cold Spring Harbor, NY 11724

Vice Chairman of the  
Board, President, Chief  
Executive Officer and  
Director

Roberto Chemello  
Vial, 10 3221  
Agordo Belluno,  
Italy

Executive Vice President,  
Treasurer and Director

Luciano Santel  
V Marcon, 8  
30174 Venezia Mestre  
Italy

Chief Financial Officer / V.P.

Debra Del Vecchio  
3 Toboggan Pass  
Cold Spring Harbor, NY 11724

Senior Vice President of  
Operations

Eugene Feola  
22 Steeplechase  
Avon, CT 06001

Secretary

86348



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **86348** 2. Name of Corporation **CASUAL CORNER GROUP, INC.**

3. Street Address Principal Business Office **100 PHOENIX AVE** City **ENFIELD** State **CT** Zip **06083**  
4. Business Phone No. **(860) 741-0771** 5. State of Incorporation **DELAWARE** 6. SIC Code **3913**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**RETAIL / WOMEN'S APPAREL**

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) ☒

President Name **CLAUDIO DELVECCHIO** Vice President Name **ROBERTO CHEMELLO**  
Street Address **100 PHOENIX AVE** Street Address **100 PHOENIX AVE**  
City **ENFIELD** State **CT** Zip **06083** City **ENFIELD** State **CT** Zip **06083**  
Secretary Name **Susi Belli** Treasurer Name **ROBERTO CHEMELLO**  
Street Address **100 PHOENIX AVE** Street Address **100 PHOENIX AVE**  
City **ENFIELD** State **CT** Zip **06083** City **ENFIELD** State **CT** Zip **06083**

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) ☒

Director Name **LEONARDO DELVECCHIO** Director Name **CLAUDIO DELVECCHIO**  
Street Address **100 PHOENIX AVE** Street Address **100 PHOENIX AVE**  
City **ENFIELD** State **CT** Zip **06083** City **ENFIELD** State **CT** Zip **06083**  
Director Name **ROBERTO CHEMELLO** Director Name **Susi Belli**  
Street Address **100 PHOENIX AVE** Street Address **100 PHOENIX AVE**  
City **ENFIELD** State **CT** Zip **06083** City **ENFIELD** State **CT** Zip **06083**

10. SHARES AUTHORIZED AND ISSUED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
<b>** SEE ACTIVITY **</b>		
<b>1,000</b>	<b>COMMON</b>	<b>.01</b>
<b>1,000</b>	<b>PREFERRED STOCK</b>	<b>.01</b>

ISSUED SHARES

Number of Shares	Class/Series	Par Value
<b>600</b>	<b>COMMON STOCK</b>	<b>.01</b>
<b>—</b>	<b>—</b>	<b>—</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 8 6 3 4 8 \*

File Date: **3/21/97**

Check No.: **220679**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

**[Signature]** **2-1-97**

**LUCIANO SANTEL**

**Chief Financial Officer**  
Title of Officer

# CASUAL CORNER GROUP, INC.

100 PHOENIX AVE. ENFIELD, CT. 06083 (860) 741-0771

## CORPORATE OFFICERS & DIRECTORS

F.E.I.N. 51-0368883

### 1. DIRECTORS

	<u>Residence Address</u>	<u>Business Address</u>
<u>LEONARDO DEL VECCHIO</u>	Vial, 10 3221 Agordo Belluno, Italy	100 Phoenix Avenue Enfield, CT 06083
<u>CLAUDIO DEL VECCHIO</u> SS# 104-66-0258	3 Toboggon Hill Path Cold Spring Harbor, NY 11724	100 Phoenix Avenue Enfield, CT 06083
<u>ROBERTO CHEMELLO</u>	Vial, 10 3221 Agordo Belluno, Italy	100 Phoenix Avenue Enfield, CT 06083
<u>SUSIBELLI</u>	Vial, 10 3221 Agordo Belluno, Italy	100 Phoenix Avenue Enfield, CT 06083

### 2. OFFICERS

<u>LEONARDO DEL VECCHIO</u> Chairman	Vial, 10 3221 Agordo Belluno, Italy	100 Phoenix Avenue Enfield, CT 06083
<u>CLAUDIO DEL VECCHIO</u> Vice Chairmam President and Chief Executive Officer SS# 104-66-0288	3 Toboggon Hill Path Cold Spring Harbor, NY 11724	100 Phoenix Avenue Enfield, CT 06083
<u>ROBERTO CHEMELLO</u> Executive Vice President Treasurer	Vial, 10 3221 Agordo Belluno, Italy	100 Phoenix Avenue Enfield, CT 06083
<u>LUCIANO SANTEL</u> Chief Financial Officer	V. Marcon, 8 30174 Venezia, Mestre	100 Phoenix Avenue Enfield, CT 06083
<u>Susi Belli</u> Senior Vice President Corporate Development and Secretary	Vial, 10 3221 Agordo Belluno, Italy	100 Phoenix Avenue Enfield, CT 06083
<u>EUGENE FEOLA</u> Assistant Secretary	22 Steeplechase Avon, CT 06001	100 Phoenix Avenue Enfield, Ct 06083

**PROFIT CORPORATON  
ANNUAL REPORT**

**1996**



State of Rhode Island and Providence Plantations  
James R. Langevin, *Secretary of State*  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903 1335 • (401) 277-3040

Filing Period: January 1-March 1  
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1 CORPORATE ID NO

2 NAME OF CORPORATION

0086348 CASUAL CORNER GROUP, INC

3 STREET ADDRESS PRINCIPAL BUSINESS OFFICE

CITY

STATE

ZIP CODE

100 PHOENIX AVE,

ENFIELD

CT

06083-

1700

4 BUSINESS PHONE NO.

5 STATE OF INCORPORATION

6 SIC CODE

(860) 741-0771

DE

3913

7 BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

A RETAIL / WOMEN'S APPAREL

**8. NAMES AND ADDRESSES OF THE OFFICERS**

PRESIDENT NAME

VICE PRESIDENT NAME

see attached

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

SECRETARY NAME

TREASURER NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

**9. NAMES AND ADDRESSES OF THE DIRECTORS**

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

DIRECTOR NAME

DIRECTOR NAME

STREET ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

**10. SHARES AUTHORIZED AND ISSUED**

NUMBER OF SHARES	AUTHORIZED SHARES CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	ISSUED SHARES CLASS / SERIES	PAR VALUE
1,000	Common	\$ 0.01	100	Common	\$ 0.01
1,000	Preferred	\$ 0.01	0	Preferred	\$ 0.01

This report must be **SIGNED IN INK** by either the  
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined  
this report, including any accompanying schedules and statements,  
and that all statements contained herein are true and correct.

File Date:

9/11/96

Check No:

184606

By:

u

For Secretary of State Use Only

Signature of Officer

Gus Belli

Print or Type Name of Officer

SECRETARY

Title of Officer

8/22/96

Date

## **CASUAL CORNER GROUP, INC.**

### **CORPORATE OFFICERS**

**F.E.I.N. 51-0368883**

Leonardo DelVecchio	-	Chairman & Chief Exec. Officer 100 Phoenix Avenue, Enfield, Ct. 06083-1700 (860) 741-0771
Claudio DelVecchio	-	President 100 Phoenix Avenue, Enfield, Ct. 06083-1700 (860) 741-0771 SS# 104-66-0258
Roberto Chemello	-	Exec. VP & Treasurer 100 Phoenix Avenue, Enfield, Ct. 06083-1700 (860) 741-0771
Susi Belli	-	Secretary 100 Phoenix Avenue, Enfield, Ct. 06083-1700 (860) 741-0771

The names, addresses, and phone numbers of the officers of Casual Corner Group, Inc. are listed above. Except for Claudio DelVecchio, each officer is a foreign resident. As such, the officers do not have social security numbers. If the officers perform services in the United States and obtain social security numbers, we will submit their social security numbers to you at that time.