


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 17, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 324387	
1. Entity Name SANDS SHOE INC	

Principal Place of Business 100 N E 2ND AVENUE MIAMI, FL 33132	Mailing Address 100 N E 2ND AVENUE MIAMI, FL 33132
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**DO NOT WRITE IN THIS SPACE**

01162008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1201018	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

WINIKOR, SYLVIA  
 1751 NE 197 TERRACE  
 NORTH MIAMI BEACH, FL 33179

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000859821  
 04/02/08-80035-021 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	SANDLER, RACHEL
STREET ADDRESS	20185 E. COUNTRY CLUB DRIVE
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	P
NAME	WINIKOR, SYLVIA
STREET ADDRESS	1751 N.E. 197TH TERRACE
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sylvia S. Winiker 1/20/08 305-358-3880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #