

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053590

Entity Name: ADESSO SHOES, LLC

FILED
Jan 15, 2007
Secretary of State

Current Principal Place of Business:

1674 W HILLSBORO BLVD
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

Current Mailing Address:

1674 W HILLSBORO BLVD
DEERFIELD BEACH, FL 33442 US

New Mailing Address:

FEI Number: 20-1383883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPES, JOAO BALTAZAR
160 BAYBERRY CIRCLE
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

FERREIRA, NILDA
3230 SW 1ST STREET
DEERFIELD BEACH, FL 33442 US

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.

SIGNATURE: NILDA FERREIRA

01/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LOPES, JOAO B
Address: 160 BAYBERRY CIRCLE
City-St-Zip: JUPITER, FL 33458 US

Title: MGRM () Delete
Name: MANFIO, ELOE
Address: 16209 SW 27TH STREET
City-St-Zip: MIRAMAR, FL 33178 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FERREIRA, NILDA
Address: 3230 SW 1ST STREET
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: MGRM (X) Change () Addition
Name: SANTOS, WILSON
Address: 3230 SW 1ST STREET
City-St-Zip: DEERFIELD BEACH, FL 33442 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NILDA FERREIRA

MGRM

01/15/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date