FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Apr 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (9)A PLUS SHOE & BOOT REPAIRS, INC. Principal Place of Business Mailing Address **3468 13TH STREET** 3468 13TH ST ST CLOUD FL 34769 ST CLOUD FL 34769 TOO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/27/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3125994 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 4 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 25 29 Personal Property Tax due June 30. 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DANLEY, RICHARD D **3501 13TH STREET** Street Address (P.O. Box Number is Not Acceptable) ST CLOUD FL 34769 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed hank of registered agent and title if applicable DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE STANLEY, GIFFORD NAME 1.2 NAME 123 SUNWOOD COURT STREET ADORESS 1.3 STREET ADDRESS KISSIMMEE FL 34743 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition STANLEY, BEATRICE NAME 2.2 NAME 123 SUNWOOD COURT STREET ADDRESS 2.3 STREET ADDRESS KISSIMMEE FL 34743 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change 61 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

I hereby 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 changed, or on an attachment with an address.

BEATRICE STAILLY VICE Resident

BRATURE:

SIGNATURE:

FILED