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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

452495

LA MILAGROSA SHOES STORE CORPORATION Principal Place of Business Mailing Address 3011 CORAL WAY 4545 N.W. 7TH ST. MIAMI FL 33145 DO NOT WRITE IN THIS SPACE US MIAM! FL 33126 US 3. Date Incorporated or Qualified 04/16/1974 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1546258 21 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Žip Ζip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. X Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Namo GONZALEZ, CIRO J. 2790 S.W. 23 TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 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 boll, 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. (NOTE: Registered Agent signature required when reinstating) gnature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE ZGONZALEŽ CIRO J NAME 1.2 NAME 2790 SW 23RD TERR MAMI, FL 99000 STREET ADDRESS 13 STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2171118 GONZALEZ-BERTHA NAME 2.2 NAME 2790 SW 23RD TERR MAMI, FL 00000 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7IP 2. 4 CITY-ST-ZIP ___ Addition TITLE DELETE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 THLE Change ___ Addition NAME 6.2 NAME

14. 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 suppliemental annual report is true and accurate and that my signalure 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.

6.3 STREET ADDRESS

CIGNATURE: V

STREET ADDRESS

2/10/98 /200/461-5821

FILED

Apr 29 1998 8:00am

Secretary of State