

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90263 010 ***150.00

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1. Entity Name
LA MILAGROSA SHOES STORE CORPORATION



Principal Place of Business

3011 CORAL WAY
MIAMI, FL 33145 US

Mailing Address

4545 N.W. 7TH ST.
12
MIAMI, FL 33126 US

20040941



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1546258

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, CIRO J.
2790 S.W. 23 TERRACE
MIAMI, FL 33145

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	GONZALEZ, CIRO J
STREET ADDRESS	2790 SW 23RD TERR 2343 SW 23 ST
CITY-ST-ZIP	MIAMI, FL 00000, MIAMI, FL 33145

TITLE	PTD
NAME	GONZALEZ, BERTHA
STREET ADDRESS	2790 SW 23RD TERR 2343 SW 23 ST
CITY-ST-ZIP	MIAMI, FL 00000, MIAMI, FL 33145

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

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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 exemption stated in Section 119.07(3)(i), 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:

CIRO GONZALEZ

04/12/05

(305) 461 5881

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

DeVine Phone #