FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

.

ANNUAL	REPOR
19	96

SIGNATURE:

DOCUMENT # 527928
1. Corporation Name

(6)

SPAN	IISH CREATIONS SHOE IM	PORTS, INC.			
Principal Place of Business Mailing Address		Mailing Address			A 1011 BIBIL BUDU BUDU BUDU DIBU DIBUK BUDU BURU HODE
1756 N.W. 23RD STREET MIAMI FL 33142		1756 N.W. 23RD STI MIAMI FL 33142	REET		
				3. Date Incorporated or Qualified 03/10/1977	3a. Date of Last Report 01/24/1995
2. Principal F	Nace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26				59-1727080	Not Applicable
in the second of		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
	27 27			6. Election Campaign Financing	Fee Required
23		28		Trust Fund Contribution	S5.00 May Be Added to Fees
Zip Lad	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25 9. Name and Address of Curre	29 Pagistered Agent	30		□ No
	9. Name and Address of Conte	ent negistered Agent	81 Name	10. Name and Address of New R	egistered Agent
ZELCE:	r, sergio				
	I.W. 23RD STREET		82 Street Addr	ess (P.O. Box Number is Not Acceptab	ile)
MIAMI	FL 33142		83		
			84 City		Jo-1 2: 0: 1:
				ration submits this statement for the pur	FL 85 Zip Code
S GNATURE	Structure transfer product remodifications of, Se Structure transfer product remodifications as OFFICERS A P ZELCER, SERGIO		VOTE Registered Agent squature response 13. 1 Title	d when runslatings ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADDRESS	ATTA MINE ASDD ATDETT		1.2 NAME		
City Sty 7:2	MIAMI FL		1.3 STREET ADDRESS		
Trill	ST	DELETE	1 4 CHY-ST-7IP 2 1 THLE		Change Addition
NAM!	ZELCER, ROSA		2 2 NAME		El Arango El Arabiton
STREET ADDRESS	4004 OF FIRE 1445 BOAR		2.3 STREET ADDRESS		
CHY ST 70	MIAMI BEACH FL		2 4 CITY - ST - Z IP		
1 [[[DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREFT ADDRESS		
CHY-ST ZIP THEF		DELETE	3.4 CITY - \$1 - ZIF 4. 1 TITLE		
NAME			4.1 MILE 4.2 NAME		Change Addition
STREET ADORESS			4.3 STREET ADDRESS		
Offy-St. Ziff			4 4 CITY-ST-ZIP		
70115		DELFTE	5 1 TOLE		Change Addition
*AMt			5.2 NAME		-··· -
STREET ADDRESS			5 3 STREET ADDRESS		
001Y+S1+Z00			5 4 CITY - ST - ZIP		
TOLE		DELFTE	6 1 TITLE		☐ Change ☐ Addition
MV:			6 2 NAME		
STREET ANGLESS			6 3 STREET ADDRESS		
0(h - \$1 - 7(f) 14. 1 do herel	. i by certify that the information supplied	with this functis voluntarily for	64 CITY - ST - ZIP	or the exemption stated in Section 119.	07/31/b) Florida Ctatistan I fishing
oath, that	a: the information indicated on this ani	nual report or supplemental ar noration or the receiver or trusi	inual report is true and accura tee empowered to execute this	or the exemption stated in Section 119, the and that my signature shall have the s report as required by Chapter 607, Fk	como logal offact on if made under

ROSA Zelcer) 1/28/96 (308)633-8282