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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham 🚬 🗻

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

589690

(7)

SHOE BANK, INC.

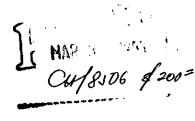
Principal Place of Business

Mailing Address

8845 SW 132 ST

**SIGNATURE:** 

8845 SW 132 ST





305-252-7463

MIAMIFLS	3176	MIAMI FL 33176			
08		US			3. Date Incorporated or Qualified 38. Date of Last Report
					10/11/1978 04/07/1995
	lace of Business	2a. Mailing Address	_	, 1	4. FEI Number Applied For
21 14951		26 14951 S. L	DIXIŒ	HW	ペン. 59-2105353 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
City & Stat	e	City & State			Fee Required
( /)	WAI, MEDRIDA	h, e' //	FEUR	/DA	6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for in angible tax under s 199.032,
24 33/		29 33176	30	54	Florida Statutes Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
			81	Name	1
HANNA, BARRY 82 Street Address				Address (P.O. Box Number is Not Acceptable)	
8845 SW 132 ST					
MIAMI	FL 33176		83		
			84	City	85 Zip Code
44 5	- A (c)	1007 1500 5			<b>►</b> I_     '
12. 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	T., *:				
12.	Signature, typed or printed name of registered agent an OFFICERS AND		Registered Ager	t signature re	required when reinstating) DATE
THILE	VS	DELETE	1. 1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	HANNA, SONIA		1.2 NAME		Change Addition
STREET ADDRESS	8845 SW 132 ST		1.2 NAME 1.3 STREET	ADDRESS	IAGE & DIVIE HIGHWAY
CITY-ST-ZIP	MIAMI FL			1	1495, S. DIXIE HIGHWAY MININ, FEORIDA 33176.  Change   Addition
TITLE	VT	☐ DELETE	1.4 CITY - S 2. 1 TITLE	1-Zir	Change Addition
NAME	HANNA, GINA	<b>_</b>	2.2 NAME		·
STREET ADDRESS	8845 SW 132 ST		2 3 STREET	ADDDCCC	14951 S. DINE HIGHWAY
CITY-ST-ZIP	MIAMI FL		2.4 CITY - S		Minny From 3317/2
TITLE	PD	DELETE	3 1 TITLE	·	Miansi, Froeida 33176.  (Change Addition
NAME	HANNA, BARRY		3.2 NAME	ĺ	
STREET ADDRESS	8845 SW 132 ST		3 3 STREET	ADDRESS	14951 S. DIXIE HIGHWAY
CITY-ST-ZIP	MIAMI, FL 00000		3.4 CITY-S	r-ZIP	14951 S. DIXIE HIGHWAY MIDNI, FEDELDA 33176.
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STREET	ADDRESS	·
CITY-ST-ZIP			4.4 CHY-S	1-ZIP	000000000000000000000000000000000000000
TITLE		☐ DELETE	5 1 TITLE		Addition
NAME			5.2 NAME	1	-04/24/9601089005 ***200.00
STREET ADORESS			5.3 STREET	address	<i>************************************</i>
CITY-ST-ZIP		·	5.4 CITY-S	- ZIP	
TITLE		☐ DELETE	6. 1 7ITLE		Change Addition
NAME			6.2 NAME		) ~
STREET ADDRESS			6.3 STREET	address	1 4.2
CHTY-ST-ZIP			6.4 CITY - S	- ZIP	
14. I do hereb certify that	ly certify that the information supplied wit tithe information indicated on this annual	h this filing is voluntarily furnish report or supplemental annual	ed and does	not qual	alify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further courate and that my signature shall have the same legal effect as if made under
oath; that	I am an officer or director of the corpora	tion or the receive or trustee e	mpewored t	o execute	te this report as required by Chapter 607, Florida Stalutes; and that my name
appears if	IDIOON IZ UIDIOON IS II COMPANISTA MI (AR	y altachiyayywiin apyzddygs	7 /		•