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 DIVISION OF CORPORATIONS 1998 DOCUMENT # 589690 (7) SHOE BANK, INC. Principal Place of Business Mailing Address 14951 S. DIXIE HWY. 14951 SOUTH DIXIE HWY MIAMI FL 33176 MIAMI FL 33176 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/11/1978 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 26 59-2105353 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ No Yes 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HANNA, BARRY 8845 SW 132 ST **B2** Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33176 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (10/97 12. OFFICERS AND DIRECTORS DELETE Change ___ Addition TITLE 1.1 TITLE HANNA, SONIA CR2E034 1.2 NAME NAME 14951 S. DIXIE HWY. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33176** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TIFLE Change Addition TITLE NAME HANNA, GINA 2.2 NAME 14951 S. DIXIE HWY. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33176 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE HANNA, BARRY NAME 3.2 NAME 14951 S. DIXIE HWY. 3.3 STREET ADDRESS STREET ADDRESS MIAM) FL 33176 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6 3 STREET ADDRESS**

14. Thereby certify that the information supplied with this filing coes 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 rue 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 life receiver or trissign or prowered 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 or an exactment system address.

LELL OR DIRECTOR

SIGNATURE:

FILED