FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 23 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name

(9)

FASHION FEET INC

PASHION FEET, INC.		
Principal Place of Business	Mailing Address	
2516 NW 2ND AVENUE Miami FL 33127	2516 NW 2ND AVENUE MIAMI FL 33127	DO NOT WRITE IN THIS SPACE
		DO NOT WHITE IN THIS SPACE

Principal Plac	e of Business	Mailing Address				
2516 NW 2ND	AVĒNUE	2516 NW 2ND AVENUE				
MIAMI FL 331		MIAMI FL 33127				DO NOT WRITE IN THIS SPACE
						3. Date incorporated or Qualified
						12/19/1983
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-2347531 Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5 Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5,00 May Be
23 Zip	Country	28	Cor	intry		Trust Fund Contribution
24	25	29	30	ıı iti y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
==	9. Name and Address of Curre		1301			10. Name and Address of New Registered Agent
KIII	BILIUN, A.	-		B1	Name	
	ROO N.E. 10TH AVE.			82	Ctroot A	Address (P.O. Box Number is Not Acceptable)
	RTH MIAMI BEACH FL 33162			02	STEELA	Address (P.O. Box Number is Not Acceptable)
,,,	THE THE SECOND CONTRACTOR			83		
				84	City	85 Zip Code
	_				•	FL []
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statue of Florida, Such change was	utes, the al	bove	named o	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Stat	utes	i.	portation of board of directors. Thereby decept the appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered a	gent and title if applicable (NO ND DIRECTORS)TE: Registered	d Ager	nt signature n	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 T	TLF		Change Addition
NAME	Kubiliun, A.		1.2 N/			
STREET ADDRESS	17600 NE 10TH AVE.				ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL			TY-SI		
TITLE	SOV	DELETE		2.1 TIFLE		Change Addition
NAME	Kubiliun, I.		22 N	AME		
STREET ADDRESS	17600 NE 10TH AVE.		2.3 ST	REET	ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL		2. 4 C	my-s	T-ZIP	
TITLE		☐ DELE TE	3.1 TI	TLE		Change Addition
NAME			3.2 NA	AME		
STREET ADDRESS			3.3 ST	AEET A	address	
CITY-ST-ZIP			3.4. C	TY-S	T-ZIP	
TITLE		☐ DELET Ē	4.1 191	ΓLE		☐ Change ☐ Addition
NAME			4. 2 N			
STREET ADDRESS			4.3 ST	REET	ADDRESS	
CITY-ST-ZIP		Doctor		4.4 City-St-Z		
TITLE		☐ DELETE		5.1 TITLE		Change Addition
NAME			5.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	.	☐ DELET É	5.4 CI		r- ZIP	Change Addition
TITLE			6.1 TIT			Change C Augmon
NAME STREET ADDRESS			6.2 NA		ADDRESS	
STREET AUUMESS			■ 0.5 SI	neel /	muumeaa (1

CITY-ST-ZIP 6.4 CITY - S7 - ZIP 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 supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.