

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H45006

Entity Name: EXITO SHOES, INC.

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

215 SW 42 AVE
APT 1003
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 141719
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 59-2501360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENAO, GUSTAVO
215 SW 42 AVE APT 1003
CORAL GABLES, FL 331341732 US

Name and Address of New Registered Agent:

HENAO, GUSTAVO
215 SW 42 AVE APT 1003
#1003
CORAL GABLES, FL 331341732 US

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.

SIGNATURE:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HENAO, GUSTAVO,
Address: 215 SW 42 AVE APT 1003
City-St-Zip: CORAL GABLES, FL 331341732

Title: VD () Delete
Name: HENAO, TERESA,
Address: 215 SW 42 AVE APT 1003
City-St-Zip: MIAMI, FL 331341732

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA HENAO

VD

01/21/2009

Electronic Signature of Signing Officer or Director

Date