

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 14, 2008 8:00 am**  
**Secretary of State**

02-14-2008 90030 020 \*\*\*150.00

**DOCUMENT # J51804**

1. Entity Name  
LA ROCCA SHOES, INC.



Principal Place of Business

% JOSEPH LA ROCCA JR.  
1403 W. BOYNTON BEACH BLVD. # 14 & 15  
BOYNTON BEACH, FL 33426 US

Mailing Address

% JOSEPH LA ROCCA JR.  
1403 W. BOYNTON BEACH BLVD. # 14 & 15  
BOYNTON BEACH, FL 33426 US



01312008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2815643

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

LA ROCCA, JOSEPH JR.  
1403 W BOYNTON BEACH BLVD.  
SUITE 14 & 15  
BOYNTON BEACH, FL 33435

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME LA ROCCA, JOSEPH JR.  
STREET ADDRESS 1406 W BOYNTON BCH BLVD #14 & 15  
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE  
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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/08

Date

561734 0032

Daytime Phone #