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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

•	MENT # MO192 TEP SHOE IMPORT CORP					
Principal Place	of Business	Mailing Address		r andrinder ein mande erang rates tibin in	ili miatr filbit	MANNA MININ ASART BIRIA INNA
6187 N.W. 167TH STREET		6187 N.W. 167TH STREET				
UNIT H-23 MIAMI FL 3301:	•	UNIT H-23 Miami FL 33015-4301				
US	3	US		3. Date Incorporated or Qualified	3а. Г	Date of Last Report
		••		06/20/1984	1	/23/1996
2. Principal Pl	ace of Business	28. Mailing Address		4. FEI Number	VI	Applied For
21	(M) (M) (M) (M)	26		59-2451635		Not Applicable
Suite, Apt	#, etc.	Suite, Apt #, etc.			<u> </u>	\$8.75 Additional
2		27		5. Certificate of Status Desired	X	Fee Required
City & State)	City & State		6. Election Campaign Financing		\$5.00 May Be
3		28		Trust Fund Contribution		Added to Fees
Zip	Country	Zip	Country	8- This corporation has liability fo	r intangibl	e tax under s. 199.032,
4	25	29	30		Yes	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	legistered	Agent
JIME	enez, jose		81 Name			
6187	N.W. 167TH STREET		82 Street Ad	Idress (P.O. Box Number is Not Accepte	able)	
UNIT	ΓH -23		0.000710	areas (i.e. box Harrison to Hat Happy	15.07	
- MIAI	M FL 33015		83			
			A4 63			les 2 - Ordo
	_		84 City		FI	85 Zip Code
SIGNATURE	othe provisions of Sections 607,005 egistered agent, or both, in the Side on familiar with, and according to oblight state. Spred or providing a support of the section of	3016		orporation submits this statement for the ration's board of directors. I hereby acc	purpose of apt the ap	of changing its registered pointment as registered
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTORS IN 12
TITLE [POT	DELETE	11 TITLE			Change Addition
NAME	JIMENEZ, JOSE		1.2 NAME			
STREET ADDRESS	6187 N.W. 167TH STREET, U	NIT H-23	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33015		1.4 CITY - ST - ZIP			
THTLE	V	DELETE	2.1 TITLE		***************************************	Change Addition
NAME	ALIAGA, FRANCISCA		2.2 NAME			
STREET ADDRESS	6187 N.W. 167TH STREET, U	NIT H-23	2.3 STREET ADDRESS			
CITY-ST-ZIP	Młami Fl. 33015		2. 4 CITY - ST - ZIP			
TITLE	V	DELETE	3.1 TITLE		·	Change Addition
NAME	JIMENEZ, FRANCISCO J.	*	3.2 NAME			
STREET ADDRESS	6187 N.W. 167TH STREET, U	NIT H-23	3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		3.4. C(TY-\$1-Z)P			
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change Addition
NAMÉ		_	5.2 NAME			- -
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - 21P			
TITLE		DELETE	61 TITLE			Change Addition
NAME		Em pendia	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
			E i			
City-Si-ZiP 14. Lde berel	ov certify that the information sugah	ed with this filing does not qualify	v for the exemption sta	ted in Section 119.07(3)(i), Florida Statu	les. I furth	er certify that the
informatic I am an o appears i	or indicated on this armual report or fficer or director of the corporation on Block 12 or Block 13 if changed	supplemental annual report is troping robeive or trastee empower or trastee empower on an attachment with an add	ue and accurate and the ered to execute this repress.	hat my signature shall have the same le port as required by Chapter 607, Florida	gal effect i Statutes;	as if made under oath, tha and that my name

SIGNATURE:

305.826.1822

FILED

Feb 04 1997 8:00am

Secretary of State