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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M19828

(6)

ATLANTIC FOOTWEAR OF FLORIDA, INC.

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FILED
Jan 23 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address 40 ATLANTIC FOOTWARE 40 ATLANTIC FOOTWARE 12250 S.W. 128 ST. 12250 S.W. 128 ST. DO NOT WRITE IN THIS SPACE MIAMI FL 33186 MIAMI FL 33186 US 3. Date Incorporated or Qualified 08/26/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2572552 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zìp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CUTLER, RACHEL 12250 S.W. 128TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33186 84 City 85 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 title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1,1 TITLE ☐ Change Addition TITLE NAME CUTLER, RACHEL 1.2 NAME 12250 S.W. 128TH STREET STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Change \_\_\_ Additlon TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change TITLE \_\_\_ DELETE 4.1 TITLE Addition 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition

6.4 CITY-ST-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 suppliemental 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 truefee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged or on any attachment with an address.

5.2 NAME

6.1 TITLE 6.2 NAME

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME STREET ADDRESS

OCHOL WILL WIRED

DELETE

1-12-98

305-251-8151

Change

Addition

R2E034 (10/97)