

700357-ANR2002

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Aug 06, 2002 8:00 am
Secretary of State

08-06-2002 90132 033 ***550.00

DOCUMENT # P00000035298**1. Entity Name**
MIAMI FEET, INC.**Principal Place of Business****THE SHOPS @ DADELAND**
MIAMI FL 33143**Mailing Address****933 MACARTHUR BOULEVARD**
MAHWAH NJ 07430**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1009264

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional**
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****CORPORATION SERVICE COMPANY**
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$550.00**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State**10. Election Campaign Financing**
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	P	<input type="checkbox"/> Delete
NAME	GORDON, JEFFREY A	
STREET ADDRESS	933 MACARTHUR BOULEVARD	
CITY-ST-ZIP	MAHWAH NJ 07430	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GUINNESSY, KATHLEEN	
STREET ADDRESS	933 MACARTHUR BOULEVARD	
CITY-ST-ZIP	MAHWAH NJ 07430	
TITLE	S	<input type="checkbox"/> Delete
NAME	RICHARDS, MAUREEN	
STREET ADDRESS	933 MACARTHUR BOULEVARD	
CITY-ST-ZIP	MAHWAH NJ 07430	
TITLE	AS	<input type="checkbox"/> Delete
NAME	SCHILLING, ROBERT K	
STREET ADDRESS	933 MACARTHUR BOULEVARD	
CITY-ST-ZIP	MAHWAH NJ 07430	
TITLE	T	<input type="checkbox"/> Delete
NAME	GUINNESSY, KATHLEEN	
STREET ADDRESS	933 MACARTHUR BOULEVARD	
CITY-ST-ZIP	MAHWAH NJ 07430	
TITLE	D	<input type="checkbox"/> Delete
NAME	SCHUBACK, MARC G	
STREET ADDRESS	933 MACARTHUR BOULEVARD	
CITY-ST-ZIP	MAHWAH NJ 07430	

TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ronald Steese	
STREET ADDRESS	67 MILLBROOK STREET, WORCESTER MASS 01606	
CITY-ST-ZIP	67 MILLBROOK STREET, WORCESTER MASS 01606	
TITLE	ASST. SECY.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Timothy Garahan	
STREET ADDRESS	67 MILLBROOK STREET, WORCESTER MASS 01606	
CITY-ST-ZIP	67 MILLBROOK STREET, WORCESTER MASS 01606	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (4/02)

13. 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 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 11 or Block 12 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****RONALD STEESE, V.P.****07-19-02****(508) 757-5006**

Date

Daytime Phone #