

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90185 004 ***150.00

DOCUMENT # P00000073038

1. Entity Name

INTERNATIONAL SHOE WAREHOUSE OF KISSIMMEE #1, IN

Principal Place of Business

1525 NW 3RD ST., SUITE 14
 DEERFIELD BCH FL 33442

Mailing Address

1525 NW 3RD ST., SUITE 14
 DEERFIELD BCH FL 33442

2. Principal Place of Business

911 E. OAKLAND PARK BLVD

Suite, Apt. #, etc.

3. Mailing Address

911 E. OAKLAND PARK BLVD

Suite, Apt. #, etc.

City & State

OAKLAND PARK FL

Zip

33334

Country

U.S.A

City & State

OAKLAND PARK FL

Zip

33334

Country

U.S.A

4. FEI Number

65-1056899

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**AHMED, MOKTER
 1525 NW 3RD ST., SUITE 14
 DEERFIELD BCH FL 33442**

7. Name and Address of New Registered Agent

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.

SIGNATURE

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

4/20/01

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 \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 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

TITLE **PVD** ☐ Delete
 NAME **ISLAM, MANZURUL**
 STREET ADDRESS **1525 NW 3RD ST., SUITE 14**
 CITY-ST-ZIP **DEERFIELD BCH FL 33442**

TITLE **ST** ☐ Delete
 NAME **HOSSEN, MONIRUL**
 STREET ADDRESS **1525 NW 3RD ST., SUITE 14**
 CITY-ST-ZIP **DEERFIELD BCH FL 33442**

TITLE **MOHAMMED M ISLAM** ☐ Delete
 NAME **MOHAMMED M ISLAM**
 STREET ADDRESS **911 E OAKLAND PARK BLVD**
 CITY-ST-ZIP **OAKLAND PARK, FL 33334**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01
 Date

954-563-2060
 Daytime Phone #

CR2E034 (10/00)

0511548