

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *101000054095*

1. Entity Name

Sobe Shoe Box Corp.

FILED

03 JUN -9 AM 8:15

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

Country

4. FEI Number

65-1108922

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Zhang, Fang Fang

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

City

*1659 Michigan Ave
Miami Beach FL 33139*

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

Fang - Fang Wang

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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
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 NAME STREET ADDRESS CITY-ST-ZIP	<i>Director Zhang, Fang Fang 4757 34th Street #C-203</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>500020688025 06/09/03-01083-022 **150.00</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Director De La Paz, Jaime</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>1345 West Avenue, #1004 Miami, FL 33139</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *De La Paz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

216110

CR2034B (12/01)

June 4, 2003

**Division of Corporation
Reinstatement Department**

To Whom It May Concern

I am sending you this letter in reference to SOBE SHOE BOX CORPORATION.

Last year in April 20 we sent our check I called a couple months due to the fact that I have not received the Renewal of my Corporation, at the time I was told by someone in your office to be Pacent, and wait for the papers. I sent several times the renewal and in October I send it again. My accountant called and was told by Justin that the papers were faxed to us in October, and that we never replied. I feel the reason for is that we do not have a fax line we used the same line, and unless, you call us first, and notify us, that you are sending a fax, we will not connect it.

This year I sent the check for the renewal, and you returned the check because the Corporation was not renewed last year.

I asked my accountant to call you and clarify this problem. He made this letter for me, because he was asked to send a letter explaining the situation, and to send the check again

Please I am requesting to waive the penalties and reinstate My Corporation.

Hoping that you can help me in my request.

Sincerely


Jaime de la Paz