2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000062857

1. Entity Name
A.J.I. SHOE WHOLESALE, INC.



Principal Place of Business

25-30 NW 77 STREET MIAMI, FL 33147

Mailing Address

10132 N W 31 COURT SUNRISE, FL 33351

FILED Mar 19, 2007 08:00 AM Secretary of State

Fee Required

Daylime Phone #



DO NOT WRITE IN THIS SPACE

02192007 No Chg-P 4. FEI Number 65-1113965		CR2E034 (11/05)				
			Applied For			
			Not Applicable			
5. Certificate of	of Status Desired	\$8.75 Additional				

6. Name and Address of Current Registered Agent

ADLAM, IVYLIN 10132 N W 31ST COURT SUNRISE, FL 33351

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees	000000673388 03/29/07-80028-003	150.00				
10.	OFFICERS AND DIREC	CTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADLAM, JOSEPH 10132 N W 31ST COURT SUNRISE, FL 33351								
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D ADLAM, IVYLIN 10132 N W 31ST COURT SUNRISE, FL 33351				,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE				
NAME STREET ADDRESS CITY-ST-ZIP						•			
TITLE NAME Street address City-St-Zip									
12. I hereby of indicated of the corp changed,	certify that the information supplied with this fill on this report or supplemental report is true as poration or the receiver of inustee empowered or on an attacognet with an address, with all	ing does not qualify for the exe ad accurate and that my signatu to execute this report as require other like empowered.	mptions cor are shall haved by Chap	ntained in Chapter 119 de the same legal effecter der 607, Florida Statute	 Florida Statutes. I further certify that as if made under oath; that I am an o is; and that my name appears in Block 	the information fficer or director 10 or Block 11 if			