

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91766 003 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P01000092723			
1. Entity Name PLANET SHOE DEPOT, CORP.			
Principal Place of Business 2319 N. STATE ROAD 7 HOLLYWOOD, FL 33021		Mailing Address 2319 N. STATE ROAD 7 HOLLYWOOD, FL 33021	
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 65-1139306		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		☐ CHECK HERE IF MAKING CHANGES	
6. Name and Address of Current Registered Agent BUITRAGO, ISLAURA 16085 SW 85TH STREET MIAMI, FL 33193		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, to the State of Florida, and accepts the obligations of a registered agent.			
SIGNATURE Signature of person in charge of registered agent and who is applying for this report Signature of Registered Agent or person in charge of business DATE			
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee			
10. OFFICERS AND DIRECTORS			
TITLE	NAME	☐ Delete	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
TITLE	NAME	☐ Delete	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
TITLE	NAME	☐ Delete	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
TITLE	NAME	☐ Delete	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
TITLE	NAME	☐ Delete	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	NAME	☐ Change ☐ Addition	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
TITLE	NAME	☐ Change ☐ Addition	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
TITLE	NAME	☐ Change ☐ Addition	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
TITLE	NAME	☐ Change ☐ Addition	
NAME	STREET ADDRESS		
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.06(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature does 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 689, Florida Statutes, and that my name appears in Article 10 or Chapter 111 of the constitution or as an attachment with an address, with all other like empowerments.			
SIGNATURE: <u>Isaura Buitrago</u> President 04-25-03			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

90128548



2003-0134 (11/02)