FILED
Mar 14, 2003 8:00 am
Secretary of State
03-14-2003 90058 014 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000086110

100038524

1. Entity Name
CUTIE SHOES, INC.

Principal Place of Business	Mailing Address
~~8965 S.W. 11TH ST.~~ ~~MIAMI, FL 33174~~	~~8965 S.W. 11TH ST. MIAMI, FL 33174~~

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
4425 SW 115 ave	4425 SW 115 ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami Florida	City & State: Miami Florida
Zip: 33165 Country: USA	Zip: 33165 Country: USA

4. FEI Number: 56-2290598 ☐ 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
ORTIZ, JESUS M ~~8965 S.W. 11TH ST.~~ ~~MIAMI, FL 33174~~	Name: Jesus Ortiz Street Address (P.O. Box Number is Not Acceptable) 4425 SW 115 ave City: Miami FL Zip Code: 33126

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: _____ 3/10/03
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILING FEE & STATE FEE TOTAL: $150.00
ANNUAL REPORT will be $550.00
Make Check Payable to: Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVST ORTIZ, JESUS M 8965 S.W. 11TH ST. MIAMI, FL 33174	☐ Delete new address	Ortiz, Jesus M PVST D 4425 SW 115 ave Miami. Fl 33165	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ORTIZ, JESUS M ~~8965 S.W.~~ 11TH ST. MIAMI, FL 33174	☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3/10/03 477-9640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #