


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2005 8:00 am
Secretary of State

02-18-2005 90063 035 ***150.00

DOCUMENT # P02000091506 1. Entity Name I.E.C. FOOTWEAR CORP.					
Principal Place of Business 18999 BISCAYNE BLVD STE 205 AVENTURA, FL 33180			Mailing Address 18999 BISCAYNE BLVD STE 205 AVENTURA, FL 33180		
2. Principal Place of Business 525 NW 29 ST. Suite, Apt. #, etc. B		3. Mailing Address Suite, Apt. #, etc.			
City & State MIAMI, FL.		City & State		4. FEI Number 22-3865855	
Zip 33127		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent YUEN, YUK W 448 NW 28 ST MIAMI, FL 33127				7. Name and Address of New Registered Agent Name YUEN-YUK W Street Address (P.O. Box Number is Not Acceptable) 525 NW 29 ST. #B City MIAMI FL Zip Code 33127	
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 <u><i>Yuk Wah Yuen</i></u> DATE <u><i>02-16-05</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	DPST YUEN, YUK W 107 NW 31 ST MIAMI, FL 33127		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD CHEN, GUI MING 497 NE 168 STREET N. MIAMI BEACH, FL 33162		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	- - - - -		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	- - - - -		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	- - - - -		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	- - - - -		<input type="checkbox"/> Delete		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u><i>Yuk Wah Yuen</i></u> <u><i>02-15-05</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		