2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P02000091506 1. Entity Name 03-02-2006 90006 011 ***150.00 I.E.C. FOOTWEAR CORP. Principal Place of Business Mailing Address 525 NW 29 ST 18999 BISCAYNE BLVD STE 205 AVENTURA, FL 33180 MIAMI, FL 33127 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01182006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 22-3865855 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YUEN, YUK W 525 NW 29TH ST Street Address (P.O. Box Number is Not Acceptable) # B MIAMI, FL 33127 City 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. 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) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. DPST TITLE ☐ Defete TITLE Change ☐ Addition YUEN, YUK W NAME NALF STREET ADDRESS 107 NW 31 ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33127 CITY-ST-ZIP TITLE . ☐ Change Delete TITLE ☐ Addition CHEN, GUI MING NAME : ! NAME STREET ADDRESS 497 NE 168 STREET STREET ADDRESS CITY-ST-ZIP N. MIAMI BEACH, FL 33162 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS C1TY-S1-21P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

FILED

Mar 02, 2006 8:00 am