2007 FOR PROFIT CORPORATION

May 25, 2007 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P02000105779 1. Entity Name A & É SHOE STORE CORP. Principal Place of Business Mailing Address 11826 NW 10 AVE 11826 NW 10 AVE MIAMI, FL 33168 MIAMI, FL 33168 05222007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 75-3083495 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **DO NOT WRITE** DE LOS SANTOS, ALEXANDER 18910 NW 7TH AVE MIAMI, FL 33169 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS 10. TITLE NAME DE LOS SANTOS, ALEXANDER STREET ADDRESS 18910 NW 7TH AVE U00000765411 MIAMI, FL 33169 CITY-ST-ZIP 06/01/07-80004-006 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS **DO NOT WRITE** CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filling 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.

NAME ... STREET ADDRESS CITY-ST-ZIP

Daylime Phone #

FILED