

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121807

Entity Name: SOLE LEATHER, INC

FILED  
Apr 11, 2006  
Secretary of State

**Current Principal Place of Business:**

11401 NW 12 ST  
152 DOLPHIN MALL  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

POBOX 450309  
SUNRISE, FL 33345

**New Mailing Address:**

FEI Number: 65-1160488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAFA, WALID A  
11401 NW 12 ST, SUITE 132  
MIAMI, FL 33172 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SAFA, WALID A  
Address: POBOX 450309  
City-St-Zip: SUNRISE, FL 33345

Title: VP ( ) Delete  
Name: SAFE, MAISAR  
Address: 2580 MAYFAIR LANE  
City-St-Zip: WESTON, FL 33327

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: SAFA, MAISAR  
Address: 2580 MAYFAIR LANE  
City-St-Zip: WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALID A. SAFA

P

04/11/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date