

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035055

Entity Name: SOHO SHOES, INC.

FILED  
Feb 07, 2005  
Secretary of State

**Current Principal Place of Business:**

815 WASHINGTON AVE.  
MIAMI BCH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

815 WASHINGTON AVE.  
MIAMI BCH, FL 33139

**New Mailing Address:**

FEI Number: 20-0890545

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MOYAL, PATRICK  
208 N. UNIVERSITY DR.  
PEMBROKE PINES, FL 33024 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/D ( ) Delete  
Name: NACHMANI, REFAEL  
Address: 1450 FLAT ROCK ROAD  
City-St-Zip: PENN VALLEY, PA 19072

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: NACHMANI, REFAEL  
Address: 1450 FLAT ROCK ROAD  
City-St-Zip: PENN VALLEY, PA 19072

Title: P ( ) Change (X) Addition  
Name: ZISSU, TAL  
Address: 10 VENITIAN WAY SUITE# 401  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Change (X) Addition  
Name: REYES, XAVIER D  
Address: 1125 WEST AVENUE TH2  
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TAL ZISSU

P

02/07/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date