



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 17, 2004

P03000066293

CERTIFIED MEDICAL MARKING INC.
P.O. BOX 291074
PORT ORANGE, FL 32129-1074

SUBJECT: SHOE CITY, INC.
Ref. Number: P03000066293

100030749281

Debit Memo #: 43297-A

This is to inform you that your check #1391 dated December 10, 2003 in the amount of \$35.00 and submitted for SHOE CITY, INC. has been returned to us by your bank because of NONSUFFICIENT FUNDS.

We request that you remit a cashier's check or money order in amount of \$50.00 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Melinda Lilliston
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call
(850) 245-6900.

Sincerely,
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 204A00010702

cc:SHOE CITY INC.
249 SHEPPARD ST.
ALTAMONTE SPRINGS, FL. 32701



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March 19, 2004

CERTIFIED MEDICAL MARKING INC.
P.O. BOX 291074
PORT ORANGE, FL 32129-1074

SUBJECT: SHOE CITY, INC.
Ref. Number: P03000066293

Debit Memo #: 43297-A

Due to your failure to respond to our previous letter advising you of the attached returned check #1391, the Officer/Director Resignation for SHOE CITY, INC. has been cancelled and is considered not filed as of March 19, 2004.

Please be advised the individual resigning in the document that was cancelled is now reflected as a current officer and/or director.

If you have any questions concerning the returned check, please call
(850) 245-6900.

Sincerely
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 904A00018444

cc:SHOE CITY INC.
249 SHEPPARD ST.
ALTAMONTE SPRINGS, FL. 32701