FILED
May 09, 2005 8:00 am
Secretary of State
05-09-2005 90298 043 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000150274

1. Entity Name
SIBA ITALIA SHOES, CORP

Principal Place of Business	Mailing Address
18179 NW 73RD AVE 106 MIAMI, FL 33015	18179 NW 73RD AVE 106 MIAMI, FL 33015

50051138

05022005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite Apt # etc	Suite Apt # etc
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number
20-0467708
☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CABRERA, AGUSTIN 18179 NW 73RD AVE 106 MIAMI, FL 33015	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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 _____ DATE
Signature, type or printed name of registered agent and title if applicable (Note: Registered Agent signature required if address is changed)

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CABRERA, AGUSTIN 18179 NW 73RD AVE STE 106 MIAMI, FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP BANDOLINO, BRUNO 18179 NW 73RD AVE STE 106 MIAMI, FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	S LLANES, YAILEN 18179 NW 73RD AVE STE 106 MIAMI, FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BANDOLINO, NICOLA 18179 NW 73 AVE STE 106 MIAMI, FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ 05/05/2005
SIGNATURE AND/OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date