

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000067293

Entity Name: D.H. SHOES CORP.

FILED  
Jul 01, 2009  
Secretary of State

## Current Principal Place of Business:

14732 SW 56 ST  
MIAMI, FL 33185

## New Principal Place of Business:

## Current Mailing Address:

14732 SW 56 ST  
MIAMI, FL 33185

## New Mailing Address:

FEI Number: 20-4881820

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LLAURADO, RAMON  
10540 NW 26 ST STE 103  
DORAL, 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

## OFFICERS AND DIRECTORS:

Title: DPV ( ) Delete  
Name: KEENE, HAL H  
Address: 14732 SW 56 ST  
City-St-Zip: MIAMI, FL 33185

Title: DST ( ) Delete  
Name: VEGA, MARIA D  
Address: 14732 SW 56 ST  
City-St-Zip: MIAMI, FL 33185

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: KEENE, HAL H  
Address: 14732 SW 56 ST  
City-St-Zip: MIAMI, FL 33185

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

Title: DVP ( ) Change (X) Addition  
Name: PUERTA, SINDY  
Address: 14732 SW 56 ST  
City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify 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: HAL H. KEENE

P

07/01/2009

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

\_\_\_\_\_  
Date