

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000072445

Entity Name: CARRION FOOTWEAR, CORP.

FILED
Mar 07, 2007
Secretary of State

Current Principal Place of Business:

9930 NW 21ST STREET
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

9930 NW 21ST STREET
DORAL, FL 33172

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABANAS & ASSOCIATES, P.A.
10520 NW 26TH STREET
SUITE C 201
DORAL, FL 33172 US

Name and Address of New Registered Agent:

GINA, CARRION
9930 NW 21 STREET
MIAMI, FL 33172 US

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: GINA CARRION

03/07/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARRION, OSCAR V
Address: 9930 NW 21ST STREET
City-St-Zip: DORAL, FL 33172

Title: VPD () Delete
Name: CARRION, VICENTE
Address: 9930 NW 21ST STREET
City-St-Zip: DORAL, FL 33172

Title: TD () Delete
Name: CARRION, DARIO
Address: 9930 NW 21ST STREET
City-St-Zip: DORAL, FL 33172

Title: SD () Delete
Name: CARRION, HERNAN
Address: 9930 NW 21ST STREET
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: OSCAR CARRION

PD

03/07/2007

Electronic Signature of Signing Officer or Director

Date