

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 24 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11728 (3)

1. Corporation Name
SPIESS SHOE CORPORATION



Principal Place of Business
804 MASON AVENUE
SUITE C
DAYTONA BEACH FL 32117-2104
US

Mailing Address
804 MASON AVENUE
SUITE C
DAYTONA BEACH FL 32117-4719
US

3. Date Incorporated or Qualified: 10/09/1986
3a. Date of Last Report: 03/19/1996
4. FEI Number: 59-2708156
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21 1182 Suwanee Road
22 City & State: Daytona Beach, FL
23 Zip: 32114-5917
24 Country: USA

2a. Mailing Address
26 1182 Suwanee Road
27 City & State: Daytona Beach, FL
28 Zip: 32114-5917
29 Country: USA

9. Name and Address of Current Registered Agent

STOCKHAUSEN, LAWRENCE R.
450 ANDALUSIA AVE.
ORMOND BEACH FL 32174

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

11. Pursuant to the provisions of Sections 607.050(2) and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent from here forth with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: (NOTE: Registered Agent signature required when resigning) DATE:

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SEIBEL, RUDOLF	
STREET ADDRESS	SCHACHENSTR. 3-11	
CITY-STATE-ZIP	D-6780 PIRMASENS GE	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	PERSCHMANN, LUTZ	
STREET ADDRESS	804 MASON AVENUE, STE. C	
CITY-STATE-ZIP	DAYTONA BCH. FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	CONSTON, HENRY	
STREET ADDRESS	90 PARK AVE	
CITY-STATE-ZIP	NEW YORK NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	Assistant Secretary Rudolph S. Houck
43 STREET ADDRESS	90 Park Avenue, 14th Floor
44 CITY-STATE-ZIP	New York, NY 10016
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

14. I, the undersigned, 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 furnished on this annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *Rudolph S. Houck* Rudolph S. Houck March 18, 1997 (212) 240-9418
0021329

CR2E034 (9/96)