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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # **P93000056982 (0)**

1. Corporate Name
COCO SHOES, INC.

Principal Place of Business
3407 MAIN HWY
COCONUT GROVE FL 33133
US

Mailing Address
3407 MIAN HWY
COCONUT GROVE FL 33133
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 3000 McFarlane Rd
Street Address, Apt. #, c/o
22
City & State
23 Coconut Grove, FL
Zip 24 33133 Country 25 USA

2a. Mailing Address
26 7326 SW 45 St
Street Address, Apt. #, c/o
27
City & State
28 Miami, FL
Zip 29 33133 Country 30 USA

3. Date Incorporated or Qualified
08/13/1993

4. FEI Number
65-0435880
[ ] Applied For
[ ] Not Applicable

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 owes or has paid the current year Intangible Personal Property Tax due June 30 [ ] Yes [ ] No

9. **Name and Address of Current Registered Agent**
ALMIR, AMIR
7250 SOUTHWEST 57TH AVENUE
SOUTH MIAMI FL 33143

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 or 617.0502, 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. The changes were authorized by the corporation's board of directors. I hereby accept the appointment as registered agent (if applicable). I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE (Required if Applicable) DATE

12. OFFICER AND DIRECTOR

TITLE	PSTD	[ ] DELETE
NAME	ALMIR, AMIR	
STREET ADDRESS	7250 S.W. 57TH AVE.	
CITY ST ZIP	SOUTH MIAMI FL 33143	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[ ] Change	[ ] Addition
12 NAME		
13 STREET ADDRESS		
14 CITY ST ZIP		
21 TITLE	[ ] Change	[ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY ST ZIP		
31 TITLE	[ ] Change	[ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE	[ ] Change	[ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE	[ ] Change	[ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE	[ ] Change	[ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

CR2E084 (10/97)

14. 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 12 or Block 13 with an address, if applicable, for each position listed.

SIGNATURE AMIR, AMIR 4/28/98 305-266-1042