

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000081814 (3)**

1. Corporation Name

GRAND SHOE INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

**25 S.E. 2ND AVE.
SUITE 720
MIAMI FL 33131**

**25 S.E. 2ND AVE.
SUITE 720
MIAMI FL 33131**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 **25**

29 **30**

9. Name and Address of Current Registered Agent

**FRANK G. LLACA
25 SE 2ND AVE
SUITE 720
MIAMI FL 33131**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

11/08/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0556278

Applied For

No: 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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

SIGNATURE

Signature typed or printed name of registered agent (if not applicable) (If not Registered Agent signature required when filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	☐ DELETE
NAME	LLACA, FRANCISCO G	
STREET ADDRESS	6071 SW 114 CT	
CITY-STATE-ZIP	MIAMI FL 33173	
TITLE	VP S	☐ DELETE
NAME	HABERMANN, JORGE A.	
STREET ADDRESS	21394 MARINA COVE CR. H-12	
CITY-STATE-ZIP	MIAMI FL 33180	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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 on filing statement with an address.

SIGNATURE: **x**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANCISCO LLACA

1/22/96

Date

Corporate Filing Fee

CR2E034 (12/95)