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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94

P94000084138 (4)

W & J SHOES, INC.

FILED Apr 22 1998 8:00am Secretary of State

, , , , , , , , , , , , , , , , , , ,				
Principal Place of Business	Mailing Address			18484 18411 BABBI (1888 PAR 1961) ARRI
1785 GULF BLVD., UNIT 301	1765 GULF BLVD., UNIT	301		
ENGLEWOOD FL 84223	ENGLEWOOD FL 34223	•••	DO MOT MOITE III	1 T. 110 00 1 0 5
			DO NOT WRITE IN 3. Date incorporated or Qualified	THIS SPACE
• •			· '	
2. Principal Place of Business	2a. Mailing Address		11/14/1994 4. FEI Number	Applied For
21	26		56-1898450	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	* 1 - 0		\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	[28]			Added to Fees
24 25	Zip 29	Country 30	8. This corporation owes or has paid to	
	of Current Registered Agent	301	Personal Property Tax due June 30 10. Name and Address of New Regis	
RARDIN, WILLIAM H		81 Name	10, 11111111111111111111111111111111111	TOTAL
1765 GULF BLVD., UNIT 3	101	OO Dan at Ania	/0.0 P N	
ENGLEWOOD FL 34223		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
		В3		
		84 City		lee Zin Onda
		,		FL 85 Zip Code
11. Pursuant to the provisions of Section	ns 607.0502 and 607.1508, Florida Statu	tes, the above-named corp	poration submits this statement for the purp tion's board of directors. I hereby accept the	oose of changing its registered
agent. I am familiar with, and accept	t the obligations of, Section 607.0505, Fl	orida Statutes.	non's board of directors, I hereby accept to	ne appointment as registered
SIGNATURE				
	registered agent and title if applicable (NOI	E: Registered Agent signature requi	-	DATE
TITLE P	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME RARDIN, WILLIAM H		1.2 NAME		C) Olizingo C) Maderion
STREET ADDRESS 1765 GULF BLVD UN		1.3 STREET ADDRESS		
CITY-ST-ZIP ENGLEWOOD FL 34		1.4 CITY - ST - ZIP		
TITLE ST	☐ DELETE	2,1 TITLE		Change Addition
HAME RARDIN, LOIS JEAN		2.2 NAME		
STREET ADDRESS 1785 GULF BLVD UN		2.3 STREET ADDRESS		
CITY-ST-ZIP ENGLEWOOD FL 34		2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
NAME	C better	4.1 311LE 4. 2 NAME		Change CT Addition
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DEL€1E	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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 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 an attachment of the anaddress.