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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500058828 (1)

MARTINEZ FOOT CENTER INC.

Principal Place of Business Mailing Address 1741 S.W. 93RD PL. 1741 S.W. 83RD PL MIAMI FL 33165 MIAMI FL 33185-7742 3. Date Incorporated or Qualified 3a. Date of Last Report 07/31/1995 08/05/1996 2. Principa Place of Business 2a. Mailing Address 4. FEI Number Applied For APPLIED FOR 26 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Żφ Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARTINEZ, CARLOS 1741 S.W. 93RD PL. Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33165 83 64 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgr atao, typed or per too name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE BluE 1.5 TITLE Change Addition NAME MARTINEZ, CARLOS 1.2 NAME 1741 S.W. 93RD PL. 1.3 STREET ADDRESS STREET AODRESS MIAMI FL 33165 CI 19 - \$1 - 712 1.4 CITY-ST-ZIP Change DELETE Addition Titlef 2.1 TITLE 22 NAME STREET ADORESS 2.3 STREET ADDRESS CITY SI-76 2 4 CITY-ST-ZIP DELETE Change HILL 3 1 TITLE Addition NAMI 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZP 34. CITY-ST-ZIP DELETE 1014.1 TITLE ☐ Change Addition 4. 2 NAME NAML ADORESS 4.3 STREET ADORESS City-St-76 4.4 CITY-ST-ZIP DELETE 100,6 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHIV-\$1-702 5.4 CITY-ST-ZIP DELETE THE 6 1 TITLE Change Addition

14. I do 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 supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or the receiver or trustee employeered 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 attacking in with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STHEET ADDRESS

0114-51-76

GNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTO

4/29/97 (305) 567-0644

FILED

May 08 1997 8:00am

Secretary of State