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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000027489

1. Corporation Name

GOTHAM SHOE COMPANY, INC.

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90138 032 ***150.00



Principal Place	of Rusiness	Mailing Address							
7000 BRYAN DAIRY ROAD. UNIT 4-A 7000 BRYAN DAIRY ROAD. UNIT LARGO FL 34647 LARGO FL 34647						DO NOT WR	TE IN THIS S	SPACE	
		_			<u> </u>	 Date Incorporated or Qualifed 03/27/1996 			
2. Principal Place of Business 2a. Mailing Address					- 4	4. FEI Number	,	· · ·	olied For
26						23-2561726			Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 Mag Added to Fe					
zip 24 3377	Country 25	^{Zip} 33777 3	Count	У		This corporation owes the cur Personal Property Tax.	rent year Inta	ngilole Ves	□No
	9. Name and Address of Current	Registered Agent			10	0. Name and Address of New	Registered A	gent	
			8	1 Name					
DANIELS, MARY JEAN				2 Street	Addross	(P.O. Box Number is Not Accept	ahla)		
417 BELLE ISLE				Sireet	Audiess	(F.O. DOX Hallings to Hot Moope	шыоу		
BELL	AIR BEACH FL 33786		8	3					
	•		8				FL	85 Zip C	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was autr	norizea d	y tne corp	corporati poration's	ion submits this statement for the board of directors. I hereby acce	purpose of o pt the appoin	hanging its tment as rec	registered jistered
SIGNATURE		AMOTE B			required whe	an anioestations)	DATE		
~~~~	Signature, typed or printed name of registered agent OFFICERS AND		13.	en signature	tedaner wife	ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
12. TITLE	PSTD	DELETE	1.1 TITLE		Τ	7.001.101.0,07.0.10.20		Change	Addition
NAME			1.2 NAMI						
STREET ADDRESS	7000 BRYAN DAIRY ROAD, UNIT 4-A			1.3 STREET ADDRESS					
CITY-ST-ZIP	LARGO FL 34647		1.4 CITY-ST-ZIP						
TITLE	☐ DELETE		2.1 TITLE		1			☐ Change	☐ Addition
NAME			2.2 NAM	Ē					
STREET ADDRESS			2.3 STRE	ET ADDRESS	s				Ì
CITY-ST-ZIP		. <u> </u>	2.4 CITY	-ST-ZIP		<u> </u>			
TITLE	·	☐ DELETE	3.1 TITLE				•	Change	☐ Addition
NAME			3.2 NAMI	•					
STREET ADDRESS			3.3 STRE	ET ADDRESS	3	•			1

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 with an address, with all other like empowered.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

Addition

Addition

Addition

☐ Change

Change

☐ Change