

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000027489

1. Entity Name
GOTHAM SHOE COMPANY, INC.

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FILED
Jul 25, 2000 8:00 am
Secretary of State

07-25-2000 90093 043 ***150.00

Principal Place of Business
7000 BRYAN DAIRY ROAD. UNIT 4-A
LARGO FL 34647

Mailing Address
7000 BRYAN DAIRY ROAD. UNIT 4-A
LARGO FL 34647

00074040



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 23-2561726		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
DANIELS, MARY JEAN 417 BELLE ISLE BELLAIR BEACH FL 33786				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Mary Jean Daniels DATE 7/18/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DANIELS, MARY JEAN 7000 BRYAN DAIRY ROAD, UNIT 4-A LARGO FL 34647 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary Jean Daniels DATE 7/18/00

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

Attachment
DH P56dww27489
DW74040

GOTHAM SHOE CO., INC.

7000 Bryan Dairy Road, #A-4

Largo, Florida 33777

727-546-9517

FAX 727 546-9781

July 18, 2000

Division of Corporations
Uniform-Business Report Filings
P.O. Box 1500
Tallahassee, Fl 32302-1500

Gentlemen:

We are in receipt of your second notice for the "2000 Uniform Business Report". As I told Leslie in your office this morning I was out of the office due to illness during the months of January and February of 2000. Because of my incapacity I never received your first notice. As per Leslie, I am enclosing our check in the amount of \$150.00. Please accept my sincere apology for this happening and I will do my utmost to see that it does not happen again.

Thank you for your kind understanding..

Sincerely,

Gotham Shoe Co., Inc.



Dorell Hart
Credit Manager.