

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

FILED
May 13 1997 8:00am
Secretary of State

DOCUMENT # P96000035337 (0)

1. Corporation Name

BALIZZA OF THE FALLS, INC.



Principal Place of Business

14951 SOUTH DIXIE HIGHWAY
MIAMI FL 33176

Mailing Address

14951 SOUTH DIXIE HIGHWAY
MIAMI FL 33176-7929

3. Date Incorporated or Qualified

04/23/1996

3a. Date of Last Report

2. Principal Place of Business

21 8088 SW 136 STREET

2a. Mailing Address

26 14951 SOUTH DIXIE HWY

4. FEI Number

65-0685623

Applied For

Not Applicable

22 Suite, Apt. #, etc.

SUITE # 180

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

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\$8.75 Additional

Fee Required

23 City & State

MIAMI - FLORIDA

28 City & State

MIAMI - FL. 33176

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be

Added to Fees

24 Zip

33176

25 Country

USA

29 Zip

33176

30 Country

USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

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Yes

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No

9. Name and Address of Current Registered Agent

SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

WORLD CLASS FOOTWEAR INC.

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

14951 SOUTH DIXIE HWY

83

84 City

MIAMI - FLORIDA

FL

85 Zip Code

33176

11. Pursuant to the provisions of Sections 607.0592 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

Signature typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PSD
HANNA, BARRY
14951 SOUTH DIXIE HIGHWAY
MIAMI FL

TITLE

GINNA, HANNA
14951, SOUTH DIXIE HWY
MIAMI - FL.
V.P.

TITLE

SONIA HANNA
14951, SOUTH DIXIE HWY
MIAMI - FL.
V.P.

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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Change

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Addition

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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 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 I am an officer or director or an attachment to this address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR
BARBARA HANNA (President)

3/20/97

Date

(305) 252-7463

Daytime Phone #

0239639

CR2E034 (9/96)