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 # P96000043460 (0)

C J L SHOE WAREHOUSE, INC.

Principal Place of Business	Mailing Address
4904 /4900 EARDEST LILL DALILEVADO	4964 (4960 EARDEST

FILED Jun 10 1997 8:00am Secretary of State

3120152

4364/4368 FORREST HILL BOULEVARD WEST PALM BEACH FL 33406			4364/4368 FORREST HILL BOULEVARD WEST PALM BEACH FL 33406										
,								T	3. Date Incorporated or Qualifier 05/14/1996	3a. D	ate of Last F	Report	
2. Principal Place of Business			2a. N	2a. Mailing Address					4. FEI Number		71	pplied For	
21		26						(Q) · 90	705		ot Applicable		
Suite, Apt. #, etc.			27						5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	Ð		h1	ity & State				1	6. Election Campaign Financing			May Be	
23 Zip	Country			Z(p Country					Trust Fund Contribution	Ц		to Fees	
24	21	¬ .	29	ıμ	Country				B. This corporation has liability to Florida Statutes	ability for intangible tax under s. 199.032, Yes No			
<u> </u>				red Agent	30	_			10. Name and Address of New				
CIDA	R1 Name 4												
		est Hill Boul	FVARD					KYIY	UN ANORES				
		CH FL 33406	LIMID	,		82 Street Add		Address	Address (P.O. Box Number is Not Accepta		ble)		
*****	T TAGIN DEA	01112 00100			ŀ	83	1						
_					ļ						- T		
•		1			_ /	В4	City			FL	85 Zip	Code	
11. Pursuant	to the provision	ns of Sections 60	7.0502 and 607	.1508, Florida Statu	tes the at	OOV	e-named	corpora	ation submits this statement for the		f changing i	its registered	
office or r	registered ager ım familiar wük	of boll on the and accept the	State of Florida obligations of S	. Such change was Section 607 0805.	authorized erida Stati	d by utes	y the corr s.	poration	ation submits this statement for the 's board of directors, I hereby acc	ept the app	pointment as	s registered	
SIGNATURE		$\mathcal{O}\mathcal{O}\mathcal{O}$					711	/		2/20	197	1	
SIGNATURE	Signature, typed or	printed name of registe	ed agent and title if a	pplicable. (NO	TE: Registered	(Age	ant signature	e required w	rhen reinstalling)	DATE	<u> </u>		
12.		OFFICER	S AND DIRECT		13.				ADDITIONS/CHANGES TO OF	ICERS AN	O DIRECTO		
TITLE	D			□ DELFTE	1,1 10	LE		ST	-		Change	Addition	
NAME	raskin, mo				1.2 NA	M£							
STREET ADDRESS		FORREST HILL			1.3 \$7	REFT	T ADDRESS						
CITY-ST-ZIP	WEST PALA	I BEACH FL 3	406		1.4 CF	Y - 5	51-7IP						
TITLE				☐ DELETE	21 11	l F				-	Change	Addition	
NAME					22 NA	ME		RAS	KIN, ANDREW		0.10	,	
STREET ADDRESS					2351	HEET	t address	1436	KIN, Another 14/4368 FORESS ALM BERGET F	HILL	CRUD	'	
CITY-ST-ZIP	 						SI-7IP	Wife	ain scall F	<u>c. 3</u>	3406	No	
TITLE				L DELETE	3.1 रा			v.o.			Change	Addition	
NAME					3.2 NA			Em	IN, KAREN 04.14368 FORRER	1 416	e be		
STREET ADDRESS					1		T ADDRESS	14.30	111368 Jourse	1 6			
CITY-ST-ZIP				DELETE			\$1-7IP	UP	· Pain Brestett	rc_	3.3√	Addition	
TITLE					4.1 1(1			,	1 11 TA . 7		Change	Modition	
NAME CTOTET ADDOCCO					4.2 N			HOU	OWITZ, JAWE	L 141	1 BUL	ا ر	
STREET ADDRESS								430	PAIN MOREH		73406		
CITY-ST-ZIP TITLE	ļ. 			DELFTE	5.1 TIT		ST-ZIP	י עו	rmin monech	rı	Change	Addition	
NAME					5.2 NA		j				Onunge		
STREET ADDRESS							i address						
CITY-ST-ZIP							ST-ZIP						
TITLE				DELETE	6.1 1(1		91° ZII	 			Change	Addition	
NAME					6.2 NA								
STREET ADDRESS							t address						
CITY-SI-ZIP					64 CI								
14. I do heret	by certify that to	he information su	oplied with this	filing does not qua	lify for the	exe	emption s	stated in	Section 119.07(3)(i), Florida Statu	tes. I furthe	r certify that	t the	
Informatio	n indicated on	this annual report	t or supplemen	tal annual report is	tyle and a	CCL	urate and	d that my	y signature shall have the same le s required by Chapter 607, Florida	gal effect a	s if made un	nder oath; that	
appears i	n Block 12 or E	Block 13 if many	od, or on an alta	achment with an	dress.	100		A POIL BY	a responded by enabled don't folice	. Junioros, e	mer unar my t	Hame	