

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 #

1. Corporation Name **PA6000046131**
FOOT ROCKETS, INC.

Principal Place of Business

Mailing Address

14806 SW 90th Ter
Miami, FL 33196

14806 SW 90th Ter
Miami, FL 33196

99 MAY 10 AM 11:15

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5/24/1996

4. FLL Number

65-0667438

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax

[] Yes [] No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

Lugo, Ruby
14806 SW 90th Ter
Miami, FL 33196

81. Name

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

83. City

84. State

FL

85. 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

Signature type to print name of registered agent, if applicable

Signature type to print name of registered agent, if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

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STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

600002882866--7

-05/21/99--01100--004

*******150.00 *****150.00**

600002882866--7

-05/21/99--01100--005

*******8.75 *****8.75**

600002882866--7

-05/21/99--01100--006

*******8.75 *****8.75**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption state law provides. I hereby 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 by a duly sworn 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 employees.

SIGNATURE: **Ruby Lugo** **Ruby Lugo**

5/6/99

305 387 9520

CR2E034 (11/98)