

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000063106

1. Entity Name

LINCOLN SHOE REPAIR, INC.



Principal Place of Business

7804 NW 44TH ST.
SUNRISE, FL 33351

Mailing Address

7804 NW 44TH ST.
SUNRISE, FL 33351



04262008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0844919

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

GUERRERO, LUIS A
7804 NW 44TH ST.
SUNRISE, FL 33351

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000543984
05/11/06-80017-016 150.00

10. OFFICERS AND DIRECTORS

TITLE DP
NAME GUERRERO, LUIS A
STREET ADDRESS 7804 NW 44TH ST.
CITY-ST-ZIP SUNRISE, FL 33351

TITLE DVP
NAME GUERRERO, JULIA T
STREET ADDRESS 7804 NW 44TH ST.
CITY-ST-ZIP SUNRISE, FL 33351

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Luis Guerrero*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-06. 954-7470
Date Daytime Phone #