2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 03, 2004
Secretary of State

DOCUMENT# P98000098223

Entity Name: LIBERTY SHOE, INC.

Current Principal Place of Business:

4139 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

4139 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0856911 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAHUL, MD
4139 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

RAHMAN, MD
1235 FUSSEX ST
BOYNTON BEACH, FL 33436 US

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: MD RAHMAN 12/03/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RAHUL, MD
Address: 10752 SW 14TH PLACE
City-St-Zip: DAVIE, FL 33324

Title: VD ( ) Delete
Name: AKTHER, MAHFUZA
Address: 3610 N 56TH AVE APT 216
City-St-Zip: HOLLYWOOD, FL 33021

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RAHUL, MD
Address: 10752 SW 14TH PLACE
City-St-Zip: DAVIE, FL 33324 US

Title: SD (X) Change ( ) Addition
Name: RAHMAN, MD
Address: 1235 FUSSEX ST
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: D ( ) Change (X) Addition
Name: MASUM, SK M
Address: 11080 SW 23RD ST
City-St-Zip: DAVIE, FL 33324 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MD RAHMAN SD 12/03/2004
Electronic Signature of Signing Officer or Director Date