## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000035122

Entity Name: LEON SHOES, INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

255 UNIVERSITY DRIVE CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

255 UNIVERSITY DRIVE CORAL GABLES, FL 33134

FEI Number: 65-0928455 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARAN, FERNANDO S
710 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL US
ARAN, FERNANDO S
255 UNIVERSITY DRIVE
CORAL GABLES, FL 33134 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: 04/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 M
 ( X) Change ( ) Addition

 Name:
 SALZVERG, DANNY
 Name:
 SALZVERG, MICHAEL

 Address:
 255 UNIVERSITY DRIVE
 Address:
 255 UNIVERSITY DRIVE

Address: 255 UNIVERSITY DRIVE
City-St-Zip: CORAL GABLES, FL 33134

Address: 255 UNIVERSITY DRIVE
City-St-Zip: CORAL GABLES, FL 33134

City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: SALZVERG MICHAEL Name: SALZVERG DAN

Name:SALZVERG, MICHAELName:SALZVERG, DANAddress:255 UNIVERSITY DRIVEAddress:255 UNIVERSITY DRIVECity-St-Zip:CORAL GABLES, FL 33134City-St-Zip:CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAN SALZVERG MR 04/25/2007