FILED **2001 UNIFORM BUSINESS REPORT (UBR)** Jul 12, 2001 8:00 am DOCUMENT # P990000 \$5467 **Secretary of State** Adm Shoe warehouse, Inc. 07-12-2001 90121 012 ***150.00 Principal Place of Business Mailing Address 4607 4th Street W 4607 4th Street W C0073240 Bradenton 76 Bradenton 71 2. Principal Place of Business 3. Mailing Address 4607 14th Street W street W 4607 1444 DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For Bradenton FL braden ton Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Αکن 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Mohammad Spiegel dutrera P.A. D. HUSEIN Street Address (P.O. Box Number is Not Acceptable) 343 Almeria Avenue Coral Gables 7L 33134 4607 14th Street West Bradenton 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 mohammad D. HUSRIN FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PTD PVSTD ☐ Addition Change TITLE ☐ Delete TITLE HUSEIN, mohammad D. HUSEIN, Mohammad D. dbot 4th Street west NAME NAME 4607 14th Street West Bradenton FL 34207 STREET ADDRESS STREET ADDRESS Bradenton, FL 34207 CITY-ST-ZIP CITY-ST-ZIP Braden ton Delete ☐ Change Addition TITLE TITLE Khaleel, Ahmad V 4607 4th Street W. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP bradenton FL ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS . CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: Max.