2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED
03 DEC -8 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03

DOCUMENT # 502518

1. Entity Name

DOMINO FOOTWEAR, INC

Principal Place of Business	Mailing Address

2. Principal Place of Business	3. Mailing Address
2065 N.W. 24 AVENUE Suite, Apt. #, etc.	2065 N.W. 24 AVENUE Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33142 Country: USA	Zip: 33142 Country: USA

4. FEI Number: 591666893 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MATZ, ISAAC
2742 BISCAYNE BLVD
MIAMI, FL. 33137

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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 _____ DATE 9/30/2003

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1st 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

$150.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SCHNIADOSKI, JULIO 5660 COLLINS AVE. é21A MIAMI BEACH, FL 33154 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President GEORGE MATZ 2065 N.W. 24 AVENUE MIAMI, FL 33142 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SCHNIADOSKI, RELA 5660 COLLINS AVE. é 21A MIAMI BEACH, FL 33154 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President KATHERINE MATZ 2065 N.W. 24 AVENUE MIAMI, FL 33142 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SANDS, ISRAEL 5660 COLLINS AVE. é 21A MIAMI BEACH, FL 33154 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	100023T70581 10/14/03--01010--023 **750.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SANDS, ROSELYN 5660 COLLINS AVE é 21A MIAMI BEACH, FL 33154 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 9/30/2003 305-636-3030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #