

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

PAID
MAR 31 1996

C4/8504 - 1200

DOCUMENT # **S91123 (7)**
OUTBACK SHOES, INC.



Principal Place of Business: 8845 SW 132 ST MIAMI FL 33176 US
Mailing Address: 8845 SW 132 ST MIAMI FL 33176 US

3. Date Incorporated or Qualified: 10/31/1991
3a. Date of Last Report: 04/07/1995

Principal Place of Business: 149515 Dixie Hwy
City & State: MIAMI, FLORIDA
Zip: 33176 Country: USA

4. FET Number: 65-0317438
5. Certificate of Status Desired:
6. Election Campaign Financing Trust Fund Contribution:
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No
10. Name and Address of New Registered Agent

PREVITI, PETER
5825 SUNSET DR.
SUITE 210
MIAMI FL 33143

81 Name: PREVITI, PETER
82 Street Address (P.O. Box Number is Not Acceptable): 5825 SUNSET DR. SUITE 210
83
84 City: MIAMI FL 85 Zip Code: 33143

I, the undersigned, in compliance with the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer, registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of Directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

DATE: 05/15/96 PART I: Registered Agent signature required when filed first DATE: 05/15/96

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE	P HANNA, BARRY 9241 S.W. 140TH ST MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE	D HANNA, GINA 9241 SW 140 ST MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE	D HANNA, SONIA 9241 SW 140 ST MIAMI FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
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<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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-05/15/96--01052--015
***200.00

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **BARRY HANNA, PRESIDENT.**
4/9/96 (305) 252-7463

CR2E034 (12/95)