

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S95122

Entity Name: SHOE ZONE, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

11050 SW 184 STREET
MIAMI, FL 33157 US

New Principal Place of Business:

8871 SW 132 STREET
MIAMI, FL 33176 US

Current Mailing Address:

11050 SW 184 STREET
MIAMI, FL 33157 US

New Mailing Address:

8871 SW 132 STREET
MIAMI, FL 33176 US

FEI Number: 65-0305617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, LINDA ESQ.
55 MIRACLE MILE
SUITE 310
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HANNA, BARRY G
Address: 11050 SW 184 STREET
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: HANNA, GINA
Address: 11050 SW 184 STREET
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: HANNA, SONIA C
Address: 11050 SW 184 STREET
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HANNA, BARRY G
Address: 8871 SW 132 STREET
City-St-Zip: MIAMI, FL 33176

Title: D (X) Change () Addition
Name: HANNA, GINA
Address: 8871 SW 132 STREET
City-St-Zip: MIAMI, FL 33176

Title: D (X) Change () Addition
Name: HANNA, SONIA C
Address: 8871 SW 132 STREET
City-St-Zip: MIAMI, FL 33176

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: BARRY HANNA

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date