

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # V11418 (3)

1. Corporation Name

LEE'S SHOES, INC.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 14 AM 10:05

Principal Place of Business

**5320 NW 78 AVENUE
LAUDERHILL FL 33351**

Mailing Address

**5320 NW 78 AVENUE
LAUDERHILL FL 33351**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/04/1992	3a. Date of Last Report 03/18/1994
4. FEI Number 65-0314765	Applied For Not Applicable
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	29

9. Name and Address of Current Registered Agent

**PARK, JUNG S.
5320 NW 78 AVENUE
LAUDERHILL FL 33351**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to 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 office or 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.

SIGNATURE

Signature of Current Registered Agent and the Approver

Signature of New Registered Agent and of an Approver

(DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME Street Address City & State Zip	DP PARK, JUNG S. 5320 NW 78 AVENUE LAUDERHILL FL	13.1 1.1 TITLE	☐ Change ☐ Addition
12.2 NAME Street Address City & State Zip	S PARK, KYONS S. 5320 NW 78 AVENUE LAUDERHILL FL	13.2 2.1 NAME	
12.3 NAME Street Address City & State Zip		13.3 2.2 STREET ADDRESS	
12.4 NAME Street Address City & State Zip		13.4 2.3 CITY - ST - ZIP	☐ Change ☐ Addition
12.5 NAME Street Address City & State Zip		13.5 3.1 TITLE	☐ Change ☐ Addition
12.6 NAME Street Address City & State Zip		13.6 3.2 NAME	
12.7 NAME Street Address City & State Zip		13.7 3.3 STREET ADDRESS	
12.8 NAME Street Address City & State Zip		13.8 3.4 CITY - ST - ZIP	☐ Change ☐ Addition
12.9 NAME Street Address City & State Zip		13.9 4.1 TITLE	☐ Change ☐ Addition
12.10 NAME Street Address City & State Zip		13.10 4.2 NAME	
12.11 NAME Street Address City & State Zip		13.11 4.3 STREET ADDRESS	
12.12 NAME Street Address City & State Zip		13.12 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
12.13 NAME Street Address City & State Zip		13.13 5.1 TITLE	☐ Change ☐ Addition
12.14 NAME Street Address City & State Zip		13.14 5.2 NAME	
12.15 NAME Street Address City & State Zip		13.15 5.3 STREET ADDRESS	
12.16 NAME Street Address City & State Zip		13.16 5.4 CITY - ST - ZIP	☐ Change ☐ Addition
12.17 NAME Street Address City & State Zip		13.17 6.1 TITLE	☐ Change ☐ Addition
12.18 NAME Street Address City & State Zip		13.18 6.2 NAME	
12.19 NAME Street Address City & State Zip		13.19 6.3 STREET ADDRESS	
12.20 NAME Street Address City & State Zip		13.20 6.4 CITY - ST - ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am a Principal 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 is printed in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jung S. Park

Jung S. Park, Pres.

02/28/95

305-733-1907

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR