

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 08:00 AM Secretary of State

DOCUMENT # V58048
1. Entity Name
TOTAL SHOE PRODUCTS CO., INC.



Principal Place of Business

2626 NE 2ND AVE. MIAMI, FL 33137 Mailing Address

2626 NE ZND AVE. MIAMI, FL 33137

|--|--|--|--|

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

U	4242006	NO Chg-P	CRZEG34 (1	W	10)
4.	FEI Number				Applied For
	65-0382649				Not Applicable

& Cadilicate of Status Desired

Not Applicable
\$8.75 Additional

5. Certificate of Status Desired Fee Required

ARBER, ISAAC 2626 NE 2ND AVE. MIAMI, FL 33137

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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 lamiliar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and site if applicable. (NOTE Registered Agent signature required when reinstating) DATE								
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May 6e Added to Fees				
10.	OFFICERS AND DIREC	CTORS	I					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARBER, ISAAC 2626 NE 2ND AVE. MIAMI, FL				900000556000 05/16/06-80056-010 150.00			
THE NAME STREET ADDRESS CHY-ST-ZIP								
TITLE NAME STREET ADDRESS CHY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				IN .	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_						
INLE			1					
NAME								
STREET ADDRESS			ł					
CITY-ST-ZIP				Antonia in Ohio in 1889	A Physical City and a defendant and the block that the 2-1-1 and a			
12. I hereby certify that the information applied with this tiling does not quality for the exemptions contained in Chapter 119, Florida Statutes 1 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 calls; that I am an officer or director of the corporation or the receiver of trustee-fempoyared 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 applicacy, with all other like empowered.								