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FLORIDA DEPARTMENT OF STATE

**PROFIT** 

SIGNATURE:

May 06 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 169498 (3)MILDORE INC Principal Place of Business Mailing Address 800 S FED HWY 2751 SO OCEAN DR HOLLYWOOD FL 131C HOLLYWOOD FL 33019 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/25/1952 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-0684739 26 Not Applicable Suite, Apt. #, etc. Suito, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. ☐ Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THEODORE, HELEN P 2751 SOUTH OCEAN DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1705-N** 83 **HOLLYWOOD FL 33019** Zip Code 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 such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ction 507.0505, Florida Statutes. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition THEODORE, HELEN P. NAME 1.2 NAME 2751 S. OCEAN DR.#1705N STREET ADDRESS 1.3 STREET ADORESS HOLLYWOOD FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 2.1 TITLE Addition BRADLEY, CHAIS 2 2 NAME 2751 SO OCEAN DR STREET ADDRESS 2.3 STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City - St - 7/P 4.4 CITY - ST- 7IP ☐ DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. Thereby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the conforation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cytanged or on an attachment with an early loss

**FILED**