

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-21-2006 90049 017 ***150.00

DOCUMENT # 302526

1. Entity Name
AMILEDA CORPORATION



Principal Place of Business
**GARDENS STRIDE RITE
3101 PGA BLVD. #F137
PALM BCH, GARDENS, FL 33410 US**

Mailing Address
**GARDENS STRIDE RITE
3101 PGA BLVD. #F137
PALM BEACH GARDENS, FL 33410 US**

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01082006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1198153 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**JEFFERY FRISHMAN
3101 PGA BLVD., #F-137
GARDENS STRIDE RITE
PALM BEACH GARDENS, FL 33410**

**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 familiar with, and accept the obligations of registered agent.

SIGNATURE: Jeffery Frischman DATE: 3-29-06
Signature, typed or printed name of registered agent and Title (Typed name) (NOTE: Registered Agent's signature required when re-registering) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRISCHMAN, JEFFREY 3101 PGA BLVD., #F-137 PALM BEACH GARDENS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROZEN, BERNARDO 19041 SE OUTRIGGER LANE JUPITER, FL 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY BENKE, DAVID 8012 S.E. SUGAR PINES WAY HOPE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT Jeffery Frischman 9406 Brentwood Cir L.W. - 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffery Frischman, President