

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # 761662

1. Entity Name
**MILIAM-DAIRY INDUSTRIAL CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**7323 NW 66TH ST
MIAMI, FL 33166**

Mailing Address
**7323 NW 66TH ST
MIAMI, FL 33166**



04162008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BENITEZ, MANUEL
7323 NW 66TH ST
MIAMI, FL 33166**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000907771
05/06/08-80001-016 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BENITEZ, MANUEL
STREET ADDRESS	7323 NW 66TH ST
CITY - ST - ZIP	MIAMI, FL 33166
TITLE	TD
NAME	RIVAS, JOSE
STREET ADDRESS	7323 NW 66TH ST #1&2
CITY - ST - ZIP	MIAMI, FL
TITLE	D
NAME	VIGON, JOSE
STREET ADDRESS	2945 SW 109TH COURT
CITY - ST - ZIP	MIAMI, FL
TITLE	S
NAME	HENRY, STEWART
STREET ADDRESS	9500 SW 6 COURT
CITY - ST - ZIP	PEMBROKE PINES, FL 33025
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 617, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MANUEL BENITEZ PRES.

4/16/08

305-885-1717

Date

Daytime Phone #