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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 820212

1. Corporation Name

22

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STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

TITLE

DE LEON III. ARMANDO

DE LEON C, ARMANDO

APARTADO POSTAL NO. 6

APODACA, N.L., ME<u>XICO</u>

APODACA, N.L. MEXICO

DE LEON. ALBERTO APARTADO POSTAL # 6

5535 FIELDWOOD

HOUSTON TX

MILWHITE, INC.

Principal Place of Business		M	Mailing Address							
7050 PORTWEST DR		70	7050 PORTWEST DR							
190			190					DO NOT WRITE IN THIS SPACE		
HOUSTON TX 77024			HOUSTON TX 77024 US				F	3. Date Incorporated or Qualifed	1	
บร		Uč						02/06/1967		
2. Principal Place of Business			2a. Mailing Address					4. FEI Number Applied For		
21			26				ĺ	74-0787350 Not Applicable		
Suite, Apt. #, etc.		L	Suite, Apt. #, etc.					5. Certificate of Status Desired XX \$8.75 Additional Fee Required	ļ.	
22 27									٠.	
City & State City & State							6. Election Campaign Financing S.00 May Be Trust Fund Contribution Added to Fees			
23	28						Tradit and Control	1		
Zip	Country	<u> </u>	Zip Country					8. This corporation owes the current year Intangible Personal Property Tax Yes No		
24	25	29		0	^			Personal Property Tax. Yes UNO 10. Name and Address of New Registered Agent	1	
9. Name and Address of Current Registered A			stered Agent	81 Name				10. Name and Address of New Registered Agent	1	
PENNINGTON, CARL R. JR. 325 KNOX RD SUITE L 101 TALLAHASSEE FL 32303				82		Address (P.O. Box Number is Not Acceptable)				
100 PM STATE OF THE STATE OF TH				84	City					
office or r	the servicions of Continue COZ DEO	of Flori	da. Such change was aut	norized	עם נ	tne corpo	corpora oration's	ation submits this statement for the purpose of changing its registered s board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered agent	and title	# anolicable (NOTE: R	enistered	Agen	t signature re	souired w	nen reinstating) DATE		
Olganiano, Apodo di Primor III di Primor III di Primor III di Primor II di Primor I				13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	1 8	
TIFLE	FM		XXDELETE 1.1 TO		TLE	^{τε} V		☐ Change 💢 Addition	(11/98)	
()			1.2 N			•	HES, MIKE			
* · · · · · · · · · · · · · · · · · · ·			1.3 51				1723, JESSICAFLANE	R2E034		
CITY-ST-ZIP HOUSTON TX				1.4 CITY-ST-ZIP		HOI	ISTON-TX	18		
		_			PD	XXX Change Addition				
	190						Гυ		1	

5.2 NAME DE LEON, ISMAEL NAME 5.3 STREET ADDRESS **APARTADO POSTAL NO 6** STREET ADDRESS 5.4 CITY-ST-ZIP APODACA N CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE ΠΠF 6.2 NAME NAME DE LEON, MAURICIO 6.3 STREET ADDRESS STREET ADDRESS APARTADO POSTAL NO 6 6.4 CITY-ST-ZIP APODACA N.L ME CITY-ST-ZIP

2.2 NAME

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

☐ DELETE

DELETE

DELETE

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

DC

2.4 CITY-ST-ZIP

14. I hereby 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 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 12 or Block 13 if changed, or or an appear with an address, with all other like empowered.

SIGNATURE:

713/881-1200

XIX Change

☐ Change

Change

☐ Addition

☐ Addition

Addition