

**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

DOCUMENT # A00000000324

1. Entity Name

MILANO INVESTMENTS, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 FEB 24 AM 9:24

Principal Place of Business

8801 SW 132 ST.
MIAMI FL 33176

Mailing Address

% MILANO INVESTMENTS INC.
8801 SW 132 ST.
MIAMI FL 33176

2. Principal Place of Business

8803 SW 132 ST

Suite, Apt. #, etc.

3. Mailing Address

8803 SW 132 ST

Suite, Apt. #, etc.



MOORE

CR2E003 (11/03)

City & State

MIA FL

City & State

MIA FL

4. FEI Number

65-0993608

Applied For

Not Applicable

Zip

33176

Country

Zip

33176

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESTRELLA, EVELIO A
8801 SW 132 ST.
MIAMI FL 33176

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

8803 SW 132 ST

City MIA

FL

Zip Code 33176

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.

DATE

9. Capital Contributions
as Shown on record.

\$9,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # P00000019172
NAME MILANO INVESTMENTS, INC.
STREET ADDRESS 8803 SW 132ND STREET
CITY-ST-ZIP MIAMI FL 33176

13. ADDRESS CHANGES ONLY

STREET ADDRESS 8803 SW 132 ST
CITY-ST-ZIP MIA FL 33176

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP 700030360537
03/12/04--01017--007 **151.75

DOCUMENT #
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STREET ADDRESS
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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE