FILED
Jul 09, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000003745

1. Entity Name
MIMI INTERNATIONAL INC.

Principal Place of Business	Mailing Address
500 MIRASOL CIRCLE, SUITE 207 CELEBRATION, FL 34747	500 MIRASOL CIRCLE, SUITE 207 CELEBRATION, FL 34747

DO NOT WRITE IN THIS SPACE

07062004 No Chg-P CR2E034 (10/03)

4. FEI Number
13-4152348
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FELICETTI, DOMINICK
500 MIRASOL CIRCLE, SUITE 207
CELEBRATION, FL 34747

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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 _____ 000000164889
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changed.) 07/09/04 DATE 000-023 150.00

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	CDPS
NAME	FELICETTI, DOMINICK
STREET ADDRESS	1500 MIRASOL CIRCLE, SUITE 207
CITY-ST-ZIP	CELEBRATION, FL 34747
TITLE	T
NAME	FELICETTI, DOMINICK
STREET ADDRESS	1500 MIRASOL CIRCLE, SUITE 207
CITY-ST-ZIP	CELEBRATION, FL 34747
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 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: X Dominic Felicetti President 7/06/04 321-246-3626
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #