

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 09, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # F99000001139

1. Entity Name  
ELECTRIC SHADE COMPANY OF SOUTH FLORIDA, INC.



Principal Place of Business  
3843 PEMBROKE ROAD  
HOLLYWOOD, FL 33021

Mailing Address  
3843 PEMBROKE ROAD  
HOLLYWOOD, FL 33021

**DO NOT WRITE IN THIS SPACE**



04012004 No Chg-P CR2E034 (10/03)

4. FEI Number  
36-4099851

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

MILA, ROBERTO  
3843 PEMBROKE RD  
PEMBROKE PINES, FL 33009

**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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000108183  
04/09/04-80045-010 150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PCDT  
MILA, ROBERTO  
3843 PEMBROKE ROAD  
HOLLYWOOD, FL 33021

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VS  
MILA, BLANCA  
3843 PEMBROKE ROAD  
HOLLYWOOD, FL 33021

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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: *Blanca L. Mila* Blanca L. Mila (VP)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/04 (954) 983-0260

Date

Daytime Phone #