2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G72018

1. Entity Name

MILMAR CORPORATION OF ORLANDO



FILED Mar 24, 2003 8:00 am Secretary of State

03-24-2003 90184 028 ***150.00

							-				
Principal Place of Business P.O. BOX 574132 ORLANDO FL 32857-4132 2. Principal Place of Business			Mailing Address P.O. BOX 574132 ORLANDO FL 32857-4132								
			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				-	☐ CHECK HERE IF MAK	NG CHANGE	c	
City & State			City & State				4. FEI Number 59-2346318				
Zip Country			Zip Co			ntry	5. Certificate of Status Desired \$8.75 Additional		Vot Applicable	₹	
6. Name and Address of Curren			t Registered Agent				Fee Required 7. Name and Address of New Registered Agent				
					· ····	Name	''	Name and Address of New Register	a Agent		\dashv
IBERTIS, (- Character of the control of the co			(0.0.0.4)				_
	/FORD CIRC) FL 32812	LE				Street Address (P.O. E	Box Number is Not Acceptable)			
V	12 020 12					City			Zip Co	de	\downarrow
8. The above	e named entity	submits this statement f	or the purr	oose of changing its	ragieter	ed office or register	od oa	gent, or both, in the State of Florida. I a		***.	_
the obliga	ations of registe	ered agent.	or are purp	oose of changing its	register	ed dilice or register	eu ag	gent, or both, in the State of Florida. I a	m familiar with	, and accept	
SIGNATURE											
	Signature, typed	or printed name of registered agen	t and title if app	olicable. (NOT	E: Registere	d Agent signature required	when re	einstating) DAT			
ال المساحدة	ILE NOW!!	FEE IS \$150.00		يا جيت بيوريجا بير مسرد			·				1_
Make Chec	r May 1, 200 k Payable to	3 Fee will be \$550.00 Florida Department of	f State					9. Election Campaign Financing Trust Fund Contribution.	□ \$5.0 □ Adde	00 May Be ed to Fees	
10.	b	OFFICERS AND	DIRECTO	RS	11.		ΑĽ	DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 11	1
TITLE NAME	DAVY, MILTO	ON		☐ Delete	TITLE	II			☐ Change	☐ Addition	3
		F. NEPTUNE 67A			NÀMI STRE	ET ADDRESS					1
CITY-ST-ZIP), VENEZUELA				-ST-ZIP					Š
TITLE ,	S	-		☐ Delete	TITLE				☐ Change		ļ ŭ
	DAVY, LUZ I				NAME				Change	☐ Addition	5
	AVE 3B-EDIF MARACAIBO	F. NEPTUNE 67A			STREE	ET ADDRESS					
	MARACAIBU	VE			CITY-	ST-ZIP					l
TITLE	V IDEDTIC CIC	N/A KIKII		☐ Delete	TITLE	ļ			☐ Change	☐ Addition	1
	BERTIS, GIO	ORD CIRCLE			NAME						ŀ
	ORLANDO F					ET ADDRESS ST-ZIP					
TITLE				□ Delete	TITLE				<u></u>		4
NAME				L Delete	NAME				☐ Change	☐ Addition	
STREET ADDRESS	ļ	~		متقديثهام اللا المعقورات		T ADDRESS		the second of th	عديد باستيپري	والمتعدد الماليموس	200
CITY-ST-ZIP					CITY-	ST-ZIP					
TITLE				☐ Delete	TITLE				☐ Change	☐ Addition	
name Street address i					NAME				•	_	
CITY-ST-ZIP						T ADDRESS					
TITLE					-	ST-ZIP					
NAME				☐ Delete	NAME				Change	☐ Addition	
STREET ADDRESS						T ADDRESS				i	
CITY-ST-ZIP					CITY-S	·				Į.	
 I hereby c indicated of the corr changed, 	ertify that the i on this report o poration or the or on an attac	information supplied with or supplemental report is receiver or trustee empt hment with an siddress, v	this filing of true and a wered to e with all other	does not qualify for accurate and that mexecute this reported and the control of	the exemy signatures require	nption stated in Sective shall have the sa ed by Chapter 607, I	tion 1 ame le Florid	19.07(3)(i), Florida Statutes. I further cegal effect as if made under oath; that is Statutes; and that my name appears	ertify that the ir am an officer in Block 10 or	nformation or director Block 11 if	

SIGNATURE:

SIGNATURE AND THE OR PRINTED MANE OF SIGNING OFFICE FOR DIRECTOR

3/20/03 401-