2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# K05032

Entity Name: MILA PROPERTIES, INC.

FILED Feb 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

C/O DARIA JAHANN
604 SAN ESTEBAN
604 SAN ESTEBAN
604 SAN ESTEBAN

CORAL GABLES, FL 33146 CORAL GABLES, FL 33146

Current Mailing Address: New Mailing Address:

C/O DARIA JAHANN
604 SAN ESTEBAN
CORAL GABLES, FL 33146

C/O LIANA JAHANN
604 SAN ESTEBAN
CORAL GABLES, FL 33146

CORAL GABLES, FL 33146

FEI Number: 65-0139389 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JAHANN, DARIA

604 SAN ESTEBAN

JAHANN, LIANA
604 SAN ESTEBAN

CORAL GABLES, FL 33146 US CORAL GABLES, FL 33146 US

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.

SIGNATURE: LIANA JAHANN 02/26/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 JAHANN, DARIA,
 Name:
 JAHANN, LIANA,

 Address:
 604 SAN ESTEBAN
 604 SAN ESTEBAN

 City-St-Zip:
 CORAL GABLES, FL 33146
 City-St-Zip:
 CORAL GABLES, FL 33146

Title: PS () Delete Title: PS (X) Change () Addition Name: JAHANN, DARIA. Name: JAHANN, LIANA.

Address: 604 SAN ESTEBAN Address: 604 SAN ESTEBAN City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: CORAL GABLES, FL 33146

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 JAHANN, DARIUS,

 Address:
 Address:
 604 SAN ESTEBAN

 City-St-Zip:
 City-St-Zip:
 CORAL GABLES, FL 33146

Title: () Delete Title: T () Change (X) Addition

 Name:
 Name:
 JAHANN, DARIUS,

 Address:
 604 SAN ESTEBAN

 City-St-Zip:
 City-St-Zip:
 CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LIANA JAHANN P 02/26/2007