## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # K12009 1. Corporation Name

THE MILLAR COMPANY, U.S.A., INC.

I LE MILL	AN COMERINE, O.O.A., III	10.				_		
Principal Place	of Business	Mailing Addre	ess				7	1 10819(t) Bat 11819 11311 63111 63111 63111 63111
	Of Dusiness	1705 S 8TH S						i
1705 S 8TH ST Fort Pierce Fl 34950		FORT PIERCE FL 34950				DO NOT WRITE IN THIS SPACE		
							3.	3.1 Date Incorporated or Qualifed
								01/15/1988
2 Principal Dir	ace of Business	2a. Mailing A	ddress		_	-	4.	4. FEI Number Applied For
Z. Principal Fia	ace of Business	26					65-0028233 Not Applicable	
Suite, Apt. #	# etc	Suite, Ap	t. #, etc.					5. Certificate of Status Desired  \$8.75 Additional Fee Required
¬	<i>"</i> , o.o.	27						
City & State	3	City & St	ate				6.	6. Election Campaign Financing \$5.00 May Be
_		28						Trust Fund Contribution Added to Fees
Zip	Country	Zíp		Coun	itry		8.	8. This corporation owes the current year Intangible
4	25	29	30	0				Personal Property Tax.
4	9. Name and Address of Curr	rent Registered Age	ent		_ ,		10	0! Name and Address of New Registered Agent
				`  ;	81 N	lame		
MILL	AR, HUDSON C., JR			-	<b>82</b> S	Street Addre	ess (	(P.O. Box Number is Not Acceptable)
1705	S. 8TH ST	•			<b>-</b>		,	1
FOR	T PIERCE FL 34947				83			는 사용하는 게 되는 것이 되었다. 그 사용 한 경우 하는 경우 하는 것이 되었다. 학생들이 함께
				-	84 0	City		85 Zip Code
					- I	•		FL
office of ragent. I a	to the provisions of Sections 607, segistered agent, or both, in the Stern familiar with, and accept the obling signature, typed or printed name of registered	ligations of, Section 6	607.0505, Florid	da Statu	ites.	·	d when	tion submits this statement for the purpose of changing its registered board of directors. I hereby accept the appointment as registered en reinstating).
40		AND DIRECTORS		13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD		☐ DELETE	1.1 TIT	LE -			☐ Change ☐ Addition
	MILLAR, HUDSON C., JR			1.2 NA	ME			
NAME	A ATIL OT			1,3 STI	REET AD	DORESS		
STREET ADDRESS	FORT PIERCE FL			1.4 CIT	TY-\$T-ZI	JP		
CITY-ST-ZIP	VSD							
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NAME			[] DELETE	2.1 TIT 2.2 NA				☐ Change ☐ Addlti
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	2710 DOVE ST		☐ DEFELE	2.2 NA 2.3 ST	ME REET AD			
CITY-ST-ZIP				2.2 NA 2.3 ST	ME REET AD			Change Additi
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NAME STREET ADDRESS CITY-ST-ZIP	2710 DOVE ST FORT PIERCE FL		☐ DELETE	2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4, CI	ME REET AL ITY-ST-2 TLE AME TREET AL ITY-ST-2	DDRESS		
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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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

01/18/1999 (561)466-5086

**FILED** 

Feb 10, 1999 8:00am

**Secretary of State** 

02-10-1999 90058 011 \*\*\*150.00