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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # K90104

MILLIAKE CORPORATION

	1-

**FILED** Apr 22 1998 8:00am Secretary of State

	WILL EVILL OOM	OHATION					I SANTAKA DIR TAHIN BURAL SIRIN BAHIN DIRIN BURAN BURAN BURAN BURAN BURAN BURAN BURAN		
Dri	ncipal Place of Busine		Mailing	Address	<del></del>				
	•	55	_						
	15 lake worth RD. IKE worth FL 33463			.ake worth RD. Worth FL 33463					
-							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
_	Principal Place of Bus	innes	- 14a	ling Address			05/23/1989		
	rnncipai riace di bus	mess	<del></del>	iling Address			4. FEI Number Applied For		
21	Sulte, Apt. #, etc.	<del></del>	26 Suit	te, Apt. #, etc.			65-0122475 Not Applicable \$8.75 Additional		
22			27	,,,			5. Certificate of Status Desired Fee Required		
	City & State			/ & State			6. Election Campaign Financing \$5.00 May Be		
23			28				Trust Fund Contribution		
_	Zip	Country	Zip		Counti	У	8. This corporation owes or has paid the current year Intangible		
24		25	29		30		Personal Property Tax due June 30.  Yes No		
		e and Address of Cui	rrent Registered	d Agent		I Name	10. Name and Address of New Registered Agent		
	KOEP <b>PE</b> L, JO				18	Name			
	C/O MIL-LAK				8:	Street .	Address (P.O. Box Number is Not Acceptable)		
	4615 LAKE V				8:				
	LAKE WORTH	1 FL 33463			١,	<b>'</b>			
					` <b>8</b> 4	City	FL 85 Zip Code		
41	Pursuant to the provi	sions of Sections 607	0502 april 607 15	508 Florida Statu	ites the above	/e-named	d corporation submits this statement for the purpose of changing its registered		
	office or registered a	gent, or both, in the St with, and accept the of	tate of Florida. S	uch change was	authorized b	y the corp	poration's board of directors. I hereby accept the appointment as registered		
610	NATURE	with, and accept the of	ziigations (ii, set	1 2020, 100 110112	ionga statut				
ő		d or printed name of registeres	l agent and blic if appl	icable (NC	TE Registered A	gont signature	e required when reinstating) DATE		
12.		OFFICERS	AND DIRECTOR	···-	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITL	1 1 1			☐ DELETE	1.1 TITLE		LA Change L Addition		
NAN		ITAHL, DANIEL			1.2 NAME				
STR	j.	AKE WORTH ROAD	l		1.3 STREE	I ADDRESS	4613 Lake Worth Rd.		
		VORTH FL 33463		C) DECEME	1.4 CITY-	ST-ZIP			
TITL				DELETE	2.1 TITLE		Change Addition		
NAM	-				2.2 NAME				
4	EET ADDRESS					1 ADDRESS	}		
TITL	-ST-ZIP			DELETE	2. 4 DITY 3.1 TITLE	- 51 - 217	Change Addition		
NAN					3.2 NAME		- Contrago - Contrago		
	ET ADDRESS					T ADDRESS			
	-ST-ZIP				3.4. DITY				
TITL				DELETE	4.1 TITLE	<u> </u>	Change Addition		
NAN	E				4. 2 NAM				
STR	ET ADDRESS				4.3 STREE	T ADDRESS			
CITY	-ST-ZIP				4.4 CITY-	ST-ZIP			
TITL				DELETE	5.1 TITLE		Change Addition		
NAM	E				5.2 NAME				
STR	ET ADDRESS				5.3 STREE	t address			
CITY	-ST-ZIP				5.4 CITY-	ST-ZIP			
TITL				DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAM	E				62 NAME				
STR	ET ADORESS				6.3 STREE	T ADDRESS			
	-ST-ZIP		-1 -511 - 20-		6.4 CiTY-		110000000000000000000000000000000000000		
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 eath; 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.								