## 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 #

L43596

(0)

## FILED Apr 30 1998 8:00am Secretary of State

MILLE!		ANUFACTURING, I	NC.						i gang kang ga Panggan	### ##################################	
Principal Plac	e of Business	s	Mailing Address				I HOROMOR ON ALOND INDIVIDUAL PRINCIPA	Att binit bil	ıı dibil Gibli Bi	en eust (S)	
% JAMES V. TEAL 2005 KIRBY AVE NE UNIT 6 2005 KIRBY AVE NE UNIT 6 2005 KIRBY AVE NE UNIT 6 PALM BAY FL 32905-3425 PALM BAY FL 32905-3425							DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified				
-							01/18/1990				
2. Principal Place of Business 12875 KIRBY AVE NE 26 2875 KIRBY					A 1		4. FEI Number			pplied For	
n 2875	26 2875 KIRE	3y AY∈	NE		59-2987024		Not Applicable				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired	
City & State			City & State				6. Election Campaign Financing			May Be	
B PALM	BAY	<u>FL</u>	28 PALM BAY		<u>- L</u>		Trust Fund Contribution			to Fees	
มเรียด	<b>1</b> 6	Country	32905	Count		_	8. This corporation owes or has p				
<u> </u>		25 BREVARD and Address of Curren		30 BRE	YAK	ν	Personal Property Tax due Jun  10. Name and Address of New R			No	
	AL JAMES		it Hogistored Agent	- 8	1 Name		IO. Hame and Address of Herr A	- Giêraiac	- York	<del></del>	
1358 SEQUOIA RD NW Palm Bay Fl 32907					2 Street	at Address (P.O. Box Number is Not Acceptable)					
FA	NUM DAT FL	. 3290/		8	3			<del></del>	<del></del>	<del></del>	
				L	<u> </u>						
				6	4 City			FL	<b>85</b> Zip	Code	
agent. I a SIGNATURE		or printed name of registered age	NC) olderalique la estit boe re				vation submits this statement for the of s board of directors. I hereby account d when reinstating)	DATE			
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFF	CERS AND			
TITLE	D	4480	L DELETE	1.1 TITLE		10	41 Tau - 3 V		Change	Addition	
NAME	TEAL, JAMES V. s 1358 SEQUOIA RD NW				1.2 NAME		4L, JANES V.	N/-			
STREET ADDRESS							COREY AYENUE		<b>-</b>		
CITY - ST - ZIP		AY FL 32907	T or ore	1.4 CITY			LM BAY FL	<u> 3290'</u>		- I Address	
TITLE	D	NV DAISE	DELETE 2.11			1			☐ Change	Addition	
NAME		NX, DAVE		22 NAME		}					
STREET ADDRESS	925 BEL	URNE FL 32935			ET ADDRESS						
CITY-ST-ZIP	PTS	DINNE FL 02800	☐ DELETE	2. 4 CITY 3.1 TITLE		PT	5	<del></del>	Change	Addition	
NAME		AMES V.		3.2 NAMI		tre.	AL, JAMES V	-	- Chindo		
STREET ADDRESS		QUOIA RD			Et <b>ad</b> dress	22	3 COREY AVENUE	NE			
CITY-ST-ZIP		AY FL 32907		3.4. CITY			LH BAY FL	329	27		
TITLE	V	=	DELETE	4.1 TITLE		177	Uri/	<u>~ - '`</u>	Change	Addition	
NAME	MULLEN	NX, DAVE		4. 2 NAM		Ì			-		
STREET ADDRESS		·			ET ADDRESS					;	
CITY-ST-ZWP	MELBOL	JANE FL 32035		44 CITY	ST-ZIP	l					
TITLE		<del></del>	DELETE	5.1 TITLE		1			Change	Addition	
NAME				5.2 NAME	i	ľ					
STREET ADDRESS				53 STRE	ET ADORESS	]					
CITY-ST-ZIP				5.4 CITY-	ST-ZIP	<u> </u>					
TITLE			☐ DELETE	6.1 TITLE					Change	Addition Addition	
NAME				62 NAME		1				ı	
STREET ADDRESS				6.3 STREE	T ADDRESS	ĺ					
CITY-ST-ZIP				6.4 CITY	ST-ZIP	<u> </u>					
			41 41 - 4111	<u> </u>			ection 119 07(3)(i) Florida Statutes	1 4	N. C. alexandre		

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 informatic 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.

SIGNATURE:

James tre

24 APRIL 98

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