

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

FILED

Mar 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M35767 (6)
1. Corporation Name
MILVA INVESTMENT INC.



Principal Place of Business Mailing Address
5451 W 9TH CT Milagros Vazquez
HIALEAH FL 33012 P.O. Box 2395
Hialeah, Fla. 33012

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt #, etc. 26 P.O. Box 2395
22 City & State 27 Suite, Apt #, etc.
23 Zip 28 Hialeah, Fla. 33012
24 Country 29 33012 30 U.S.A.

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified
07/25/1986
4. FEI Number
59-2717040
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
VAZQUEZ, ADALBERTO
5451 W 9TH CT
HIALEAH FL 33012
10. Name and Address of New Registered Agent
81 Name
VAZQUEZ, MILAGROS
82 Street Address (P.O. Box Number is Not Acceptable)
5451 W. 9th. Court
83
84 City
Hialeah, FL 85 Zip Code
33012

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Milagros Vazquez* MILAGROS VAZQUEZ 3-9-98
Signature, typed or printed name of registered agent and fee is applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAZQUEZ, ADALBERTO	1.2 NAME	
STREET ADDRESS	5451 W 9TH CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAZQUEZ, MILAGROS	2.2 NAME	D/P/S/T
STREET ADDRESS	5451 W 9TH CT	2.3 STREET ADDRESS	VAZQUEZ, MILAGROS
CITY-ST-ZIP	HIALEAH FL	2.4 CITY-ST-ZIP	5451 W. 9th. CT
TITLE		3.1 TITLE	Hialeah, Fla. 33012
NAME		3.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

SIGNATURE: *Milagros Vazquez* MILAGROS VAZQUEZ 3-9-98

CR2E034 (10/97)