

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90660 038 ***150.00

DOCUMENT # P00000053003

1. Entity Name

MILANE CORPORATION



Principal Place of Business

2844 STIRLING ROAD
SUITE A
HOLLYWOOD FL 33020

Mailing Address

2844 STIRLING ROAD
SUITE A
HOLLYWOOD FL 33020

2. Principal Place of Business

2844 STIRLING RD

Suite, Apt. #, etc.

SUITE A

3. Mailing Address

2844 STIRLING RD

Suite, Apt. #, etc.

SUITE A

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD FL

Zip

33020

Country

USA

Zip

33020

Country

USA



MOORE

CR2E034 (11/03)

4. FEI Number

59-3649096

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COOKE, MARLENE
8221 SW 15TH STREET
APT 122
FORT LAUDERDALE FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

20120 GULFSTREAM RD

City

MIAMI

FL

Zip Code

33189

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE FO ☒ Delete
NAME COOKE, INGRID
STREET ADDRESS 2439 NW 49TH TERRACE
CITY-ST-ZIP COCONUT CREEK FL 33063

TITLE PR ☒ Delete
NAME COOKE, RONALD
STREET ADDRESS 155 JOYCE ST
CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE P ☐ Delete
NAME COOKE-EVITT, MARLENE
STREET ADDRESS 3423 SW-52ND AVENUE
CITY-ST-ZIP HOLLYWOOD FL 33023

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME COOKE-EVITT MARLENE
STREET ADDRESS 20120 GULFSTREAM RD
CITY-ST-ZIP MIAMI FL 33189

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARLENE COOKE-EVITT 4-20-04 (954) 805-0743
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone