

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90056 047 ***150.00

DOCUMENT # P000000656551. Entity Name
MILAN USA, INC.Principal Place of Business
**851 ATLANTIC SHORES BLVD #230
HALLANDALE FL 33009**Mailing Address
**851 ATLANTIC SHORES BLVD #230
HALLANDALE FL 33009**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1021986**Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****LANTHIER, MICHELINE
851 ATLANTIC SHORES BLVD #230
HALLANDALE FL 33009**

Name

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

City

FL

Zip Code

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

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees****11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D	LANTHIER, MICHELINE	851 ATLANTIC SHORES BLVD #230	HALLANDALE FL 33009	<input type="checkbox"/>					
	D	VAILLANCOURT, JEAN	851 ATLANTIC SHORES BLVD #230	HALLANDALE FL 33009	<input type="checkbox"/>					
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHELINE LANTHIER**09/06/2002 954-456-6270**
Date Daytime Phone #

CR2E034 (4/02)

Attachment
P00000068655

979403

September 6th 2002.

To whom it may concern.

I never received the first
notice for the Business Reform Report.
So I included a check
of \$150.⁰⁰ for the corporation.

Michelle Lanthier
President.