

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000084598

Entity Name: MILDOR ENTERPRISE, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

20570 NE 8TH COURT
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

PO BOX 693411
MIAMI, FL 33269

New Mailing Address:

FEI Number: 65-1034397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILDOR, NETTIE
20570 NE 8 CT
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILDOR, LAVANETTE
Address: 20570 NE 8 CT
City-St-Zip: MIAMI, FL 33179

Title: D (X) Delete
Name: AMPARO, SARADY
Address: 20570 NE 8 CT
City-St-Zip: MIAMI, FL 33179

Title: D (X) Delete
Name: MILDOR, MELANIE
Address: 1300 NW 120 ST
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAVANETTE MILDOR

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date