


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 17, 2004 8:00 am
Secretary of State

09-17-2004 90001 035 ***150.00

DOCUMENT # P03000044938			
1. Entity Name AURILI CORPORATION			
Principal Place of Business 467 SE 23 DR HOMESTEAD, FL 33033		Mailing Address 467 SE 23 DR HOMESTEAD, FL 33033	
2. Principal Place of Business 180 Royal Palm Rd		3. Mailing Address 180 Royal Palm Rd	
Suite, Apt. #, etc. # 110		Suite, Apt. #, etc. # 110	
City & State Hialeah Garden, FL		City & State Hialeah, Garden, FL	
Zip 33016	Country	Zip 33016	Country

54073016



09152004 Chg-P CR2E034 (10/03)

4. FEI Number 37-1465237	Applied For <input type="checkbox"/>	Not Applied <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent MONTOKA, LILIANA 467 SE 23 DR HOMESTEAD, FL 33033		7. Name and Address of New Registered Agent Name MONTOKA LILIANA Street Address (P.O. Box Number is Not Acceptable) 180 Royal Palm Rd # 110 City Hialeah Garden FL Zip Code 33016	
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 acknowledge the obligations of, the registered agent.			
SIGNATURE <i>[Signature]</i>		DATE 09/01/04	

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., if corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MONTOKA, LILIANA 467 SE 23 DR HOMESTEAD, FL 33033 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MONTOKA, LILIANA 180 Royal Palm Rd # 110 Hialeah Garden, FL 33016 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Ad
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS MONTOKA, WILLIAM E 467 SE 23 DR HOMESTEAD, FL 33033 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS MONTOKA, WILLIAM E 180 Royal Palm Rd # 110 Hialeah Garden, FL 33016 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Ad
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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"/> Ad

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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **09/01/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #