

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125123

Entity Name: A MILIAN, INC.

FILED
Jan 17, 2005
Secretary of State

Current Principal Place of Business:

1000 ARLINGTON CIRCLE
OVIEDO, FL 32765 US

New Principal Place of Business:

1089 TIVOLI DRIVE
DELTONA, FL 32725 US

Current Mailing Address:

1000 ARLINGTON CIRCLE
OVIEDO, FL 32765 US

New Mailing Address:

1089 TIVOLI DRIVE
DELTONA, FL 32725 US

FEI Number: 71-0955701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILIAN, ANTONINO
1000 ARLINGTON CIRCLE
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

MILIAN, ANTONINO
1089 TIVOLI DRIVE
DELTONA, FL 32725 US

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: ANTONINO MILIAN

01/17/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILIAN, ANTONINO
Address: 1000 ARLINGTON CIRCLE
City-St-Zip: OVIEDO, FL 32765 US

Title: VP () Delete
Name: MILIAN, ALEXYZ
Address: 1000 ARLINGTON CR.
City-St-Zip: OVIEDO, FL 32765

Title: VP () Delete
Name: MILIAN, ANTONINO JR.
Address: 1221 E. HANOCK DR.
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MILIAN, ANTONINO
Address: 1089 TIVOLI DRIVE
City-St-Zip: DELTONA, FL 32725 US

Title: VP (X) Change () Addition
Name: MILIAN, ALEXYZ
Address: 1089 TIVOLI DRIVE
City-St-Zip: DELTONA, FL 32725

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANTONINO MILIAN

D

01/17/2005

Electronic Signature of Signing Officer or Director

Date