

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000125620

FILED
Mar 18, 2008
Secretary of State

Entity Name: MILIFARMS, INC.

Current Principal Place of Business:

1220 WINTERGARDEN VINELAND RD
104
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

Current Mailing Address:

1220 WINTERGARDEN VINELAND RD
104
WINTER GARDEN, FL 34787 US

New Mailing Address:

FEI Number: 13-4293699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMACHO, CESAR
704 RAINFALL DRIVE
WINTER GARDEN, FL 34787 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: PS () Delete
Name: CAMACHO, MAURICIO
Address: 704 RAINFALL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: V () Delete
Name: AGUIRRE DE CAMACHO, YOLANDA
Address: 704 RAINFALL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: GM () Delete
Name: CAMACHO, CESAR
Address: 704 RAINFALL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: PM () Delete
Name: CAMACHO, DIEGO
Address: 704 RAINFALL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: FM () Delete
Name: CAMACHO, SANTIAGO
Address: 704 RAINFALL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: QCM () Delete
Name: CAMACHO, CESAR
Address: 704 RAINFALL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

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:

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: CESAR CAMACHO

GM

03/18/2008

Electronic Signature of Signing Officer or Director

_____ Date