FILED May 22, 2007 8:00 am Secretary of State 04-27-2007 90219 049 ***150.00

2007 FOR PROFIT CORPORATION > ANNUAL REPORT

DOCUMENT # P06000102908 1. Entity Name MILL DECOR & DESIGNS CORP								U 1 O 1 U <i>(</i>	130.00
Principal Place of Business Mailing Address						7		• • • • • • •	
159 N CENTRAL AVE STE D 159 N CENTRAL AVE STE OVIEDO, FL 32765					D ·		I BRITA BRID BRITA KOTA BRITA	ie mini at iin wwy thas orthe	EHREN ER TOPT
2. Principal Place of Business - No P.O. Box # 3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04242007	Chg-P	CR2E034 (12/06)	
City & State			City & State			4. FEI Numb	341960	———	pplied For ot Applicable
Zip	Zip Country		Zip Count		itry		of Status Desired	S8.75 Ad For Poquire	ditional
6Name and Address of Current Registered Agent					7:- Name and Address of New Registered Agent				
AYALA, MARIO 3434 PINEBROOK CT					Street Address (P.O. Box Number is Not Acceptable)				
ORLANDO, FL 32822							-		
					City			FL Zip Cox	ie
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									
Signiture, hoad or prised name of registered agent and late if explicable. INDTE: Registered Agent aigniture required when remistating) DATE									
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10. OFFICERS AND DIRECTORS 11.					- ·· -y	ADDITIONS	/CHANGES TO OFF	CERS AND DIRECTOR	
TITLE NAME	P Detate III				-			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP					EET AOORESS (-ST-ZIP				
TITLE	T Delete III							Change	Addition
NAME STREET ADDRESS	AYALA, MARIO 3434 PINEBROOK CT			NAM STR	AE EET ADORESS				
CITY-S1-ZIP	ORLANDO, FL 328			r-57-2P					
TITLE	☐ Delete Tift							Change	☐ Addition
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STREET ADDRESS CITY-SI-ZIP				SIR	KE EET ADORESS Y-ST-ZIP				
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STREET ADDRESS CITY-ST-ZIP					AE EET ADORESS Y-SI-ZIP				
MLE			C Delzie	īm	1			☐ Change	Addition
STREET ADDRESS CITY-S1-ZIP		. 1			ME EET ADORESS Y-ST-ZIP				
12. I hereby certily that the information samplied with this filing does not qualify for the exemptions contained 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 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 triggle empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an strachment with an applicates, with all other like empowered.									
SIGNATURE: BIGHATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR BIGHATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Description:									