2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000134377

Entity Name: MILNE ALEXCIA INC.

Name:

Address: City-St-Zip: BARTHOLOMEW, MIRIAM

LAUDERHILL, FL 33319 BR

4461 N.W. 72 AVENUE

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	72 AVENUE ILL, FL 33319	BR		8 TERRACE ON, FL 33322	BR	
Current Mailing Address:			New Maili	New Mailing Address:		
	72 AVENUE ILL, FL 33319	BR		8 TERRACE ON, FL 33322	BR	
FEI Number:	41-2217575	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desir	ed()
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
18350 N.W SUITE 500 MIAMI, FL The above in the State	33169 US named entity s of Florida.	: ubmits this statement for the p	ourpose of changing i	ts registered off	ice or registered agent	, or both,
SIGNATUR		c Signature of Registered Age	ent		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () RHODEN, PAUL 4461 N.W. 72 AV LAUDERHILL, FI	/ENUE	Title: Name: Address: City-St-Zip:	()(Change()Addition	
Title: Name: Address: City-St-Zip:	VP () DEMPSTER, AN 4461 N,W. 72 AV LAUDERHILL, FI	/ENUE	Title: Name: Address: City-St-Zip:	VP (X) (BARTHOLOMEW 1295 NW 78 TER PLANTATION, FL	RACE	
Title:	S ()	Delete	Title:	S (X)	Change () Addition	

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.

Name:

Address:

City-St-Zip:

BARTHOLOMEW, MIRIAM

PLANTATION, FL 33322 BR

1295 NW 78 TERRACE

SIGNATURE: MIRIAM BARTHOLOMEW VP 04/29/2008