2008 FOR PROFIT CORPORATION

FILED Jan 24, 2008 08:00 AN Secretary of State

| ANNUAL REPURT | | | | Secretary of Sta | | | |
|--|--|--|--------------------------------|---------------------|--|-------------------|--|
| DOCUMENT # P93000046705 | | | | | • | | ary or su |
| 1. Entity Name MILLS AP | e PPAREL SALES, INC. | | | | | | |
| Principal Place of Business 4429 BARDSDALE DRIVE PALM HARBOR, FL 34685 | | Mailing Address 4429 BARDSDALE DRIVE PALM HARBOR, FL 34685 | | | | | |
| | | | | 01162008 | No Chg-P | CR2E034 | |
| DO NOT WRITE IN THIS SPAC | | | CE | 4. FEI Numbe 59-319 | | | Applied For Not Applicable 3.75 Additional |
| in the second | 6. Name and Address of Current Re | gistered Agent | | 3. Certificate | or o | Fe | e Required |
| | RENDA J DSDALE DRIVE RBOR, FL 34685 | | . : | | NOT W | | |
| the obligate | e named entity submits this statement for the tions of registered agent. Signature typed or printed name of registered ancet and the tions of the t | 9. Election Campaign Fin: | aren Volent eidinsimm is dinse | | | 715 8 5001 | |
| 10. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS CHY-ST-ZIP | OFFICERS AND DI D MILLS, BRENDA J 4429 BARDSDALE DR PALM HARBOR, FL 34685 | RECTORS | | | | | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | | | | | NOT W | | |
| NAME STREET ADDRESS | | | | | والس الله المراجعة والمراجعة | | |

12. Thereby certify that the information supplied with this filling 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 signal rie 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Sunde J. Mulls

GRATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER

BRENDA

J. MILLS/1-21-0

(942-7760 3yure Prone #