

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
OFFICE OF THE SECRETARY
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA 32399-0001

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS

95 MAY -1 AM 10:59

DOCUMENT # **P94000072086 (9)**

R. MILIAN & ASSOCIATES, CORP.

1. Principal Office of the Corporation 430 SOUTH WEST 78 AVE. MIAMI FL 33144		2a. Mailing Address 430 SOUTH WEST 78 AVE. MIAMI FL 33144		3. Date of Incorporation (2/2 Number) 09/28/1994		3a. Date of First Report 09/28/1994	
2. Principal Office of the Corporation 21	2a. Mailing Address 26	4. Filing Number 65-0625296		5. Certificate of Status (Fees) \$8.75 Additional Fee Required		6. The fee for foreign exchange and bonded liability is included \$5.00 May Be Added to Fees	
22	27	23		24		25	
9. Name and Address of Current Registered Agent PAYAS, ARMANDO 1018 E. ROBINSON ST. ORLANDO FL 32801				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City, State, Zip FL 85			
11. I, the undersigned, do hereby certify that the foregoing is a true and correct copy of the information required by Chapter 682, Florida Statutes, and that the same is true and correct as of the date of filing of this report. I am a duly qualified and licensed professional person in the State of Florida, and I am duly qualified and licensed to practice in the State of Florida.							
SIGNATURE							
12. OFFICERS AND DIRECTORS				13. ADDITIONAL OFFICERS AND DIRECTORS (If Applicable)			
NAME D MILIAN, RAUL ADDRESS 430 SW 78 AVE. MIAMI FL 33144				NAME 14 ADDRESS 15 CITY, STATE, ZIP 16			
NAME 17 ADDRESS 18 CITY, STATE, ZIP 19				NAME 20 ADDRESS 21 CITY, STATE, ZIP 22			
NAME 23 ADDRESS 24 CITY, STATE, ZIP 25				NAME 26 ADDRESS 27 CITY, STATE, ZIP 28			
NAME 29 ADDRESS 30 CITY, STATE, ZIP 31				NAME 32 ADDRESS 33 CITY, STATE, ZIP 34			
NAME 35 ADDRESS 36 CITY, STATE, ZIP 37				NAME 38 ADDRESS 39 CITY, STATE, ZIP 40			
NAME 41 ADDRESS 42 CITY, STATE, ZIP 43				NAME 44 ADDRESS 45 CITY, STATE, ZIP 46			
NAME 47 ADDRESS 48 CITY, STATE, ZIP 49				NAME 50 ADDRESS 51 CITY, STATE, ZIP 52			
NAME 53 ADDRESS 54 CITY, STATE, ZIP 55				NAME 56 ADDRESS 57 CITY, STATE, ZIP 58			
NAME 59 ADDRESS 60 CITY, STATE, ZIP 61				NAME 62 ADDRESS 63 CITY, STATE, ZIP 64			
NAME 65 ADDRESS 66 CITY, STATE, ZIP 67				NAME 68 ADDRESS 69 CITY, STATE, ZIP 70			
NAME 71 ADDRESS 72 CITY, STATE, ZIP 73				NAME 74 ADDRESS 75 CITY, STATE, ZIP 76			
NAME 77 ADDRESS 78 CITY, STATE, ZIP 79				NAME 80 ADDRESS 81 CITY, STATE, ZIP 82			
NAME 83 ADDRESS 84 CITY, STATE, ZIP 85				NAME 86 ADDRESS 87 CITY, STATE, ZIP 88			
NAME 89 ADDRESS 90 CITY, STATE, ZIP 91				NAME 92 ADDRESS 93 CITY, STATE, ZIP 94			
NAME 95 ADDRESS 96 CITY, STATE, ZIP 97				NAME 98 ADDRESS 99 CITY, STATE, ZIP 100			

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Raul Milian
RAUL MILIAN

4/17/95
4/17/95

305-264-7410
305-264-7410