

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 SEP 19 PM 1:31

DOCUMENT # P95000016495 (0)

1. Corporation Name

IMILLA, INC.

Principal Place of Business

2101 N.W. 108TH AVENUE
MIAMI FL 33172

Mailing Address

2101 N.W. 108TH AVENUE
MIAMI FL 33172



2. Principal Place of Business		2a. Mailing Address	
21 2101 N.W. 108th Ave	26 P.O. Box 650677	4. FEI Number 63-0687127	
Suite, Apt. #, etc.		Applied For	
22 City & State Miami, Florida		27 City & State Miami, FL 33166	
23 Zip 33172 Country FL		29 Zip 33265 Country FL	
24 33172		25 FL	
26 33265		27 FL	

3. Date Incorporated or Qualified 02/28/1995	3a. Date of Last Report
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
VARGA, SUSANA 2101 N.W. 108TH AVENUE MIAMI FL 33172		81 Name Same	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83 300001903553	
		84 City 10403/96-11022-006	
		****383.75 FL 85 430.75	

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		(NOTE: Registered Agent signature required when changing)	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
President	Susana Varga	13 STREET ADDRESS	14 CITY-ST-ZIP
10410 S.W. 41st	Miami, FL 33165	21 TITLE	22 NAME
23 STREET ADDRESS	24 CITY-ST-ZIP	23 STREET ADDRESS	24 CITY-ST-ZIP
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-1-96-305
7164992