

FILE NOW: FILING FEE, AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED Apr 02 1997 8:00am Secretary of State

DOCUMENT # P95000024658 (3)

1. Corporation Name MILLIE O. INTERNATIONAL, INC.

Principal Place of Business 717 WEST 36TH STREET HIALEAH FL 33012

Mailing Address 717 WEST 36TH STREET HIALEAH FL 33012-5137



2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

ONORATO, MILDRED M 717 WEST 36TH STREET HIALEAH FL 33012

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

3. Date Incorporated or Qualified 03/27/1995

3a. Date of Last Report 04/08/1996

4. FEI Number 65-0589161

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. D ONORATO, ANTHONY F 717 WEST 36TH STREET HIALEAH FL 33012

11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY - ST - ZIP

Change Addition

2. D ONORATO, MILDRED M 717 WEST 36TH STREET HIALEAH FL 33012

21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY - ST - ZIP

Change Addition

3. [Empty]

31. TITLE 32. NAME 33. STREET ADDRESS 34. CITY - ST - ZIP

Change Addition

4. [Empty]

41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY - ST - ZIP

Change Addition

5. [Empty]

51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY - ST - ZIP

Change Addition

6. [Empty]

61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY - ST - ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mildred M. Onorato

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/97

Date

305-639-3555

Daytime Phone #

CR2E034 (9/96)