

FILE NOW: FILING FEE AFTER MAY 1 IS \$55.00

FILED

Mar 26 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000079913 (6)

1. Corporation Name
MILENA'S SPICES, INC.



Principal Place of Business

7154 N. UNIVERSITY DR
SUITE 125
TAMARAC FL 33321

Mailing Address

7154 N. UNIVERSITY DR
SUITE 125
TAMARAC FL 33321-2916

3. Date Incorporated or Qualified
10/16/1995

3a. Date of Last Report
04/18/1996

2. Principal Place of Business
#2609
8955 Ramblewood DR

2a. Mailing Address
2401 DELGADO DR.

21. Suite, Apt. #, etc.
CORAL SPRINGS, FL

26. Suite, Apt. #, etc.
TALLAHASSEE, FL

22. City & State
33071 U.S.

27. City & State
32304 U.S.

23. Zip
Country

28. Zip
Country

4. FEI Number
65-0613870
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

9. Name and Address of Current Registered Agent

MACESICH, MILENA
7154 N UNIVERSITY DR
SUITE 125
TAMARAC FL 33321

10. Name and Address of New Registered Agent

81 Name
MILENA MACESICH
82 Street Address (P.O. Box Number is Not Acceptable)
8955 Ramblewood Dr. #2609
83 CORAL SPRINGS, FL 33071
84 City
FL 85 Zip Code

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: *Milena Macesich*

3/20/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	MACESICH, MILENA	
STREET ADDRESS	7154 N UNIVERSITY DR, SUITE 125	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MACESICH, MILENA	
1.3 STREET ADDRESS	8955 Ramblewood Dr. 2609	
1.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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: *Milena Macesich*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/97

954-752-9907

CR2E034 (9/96)