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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

CITY-ST-ZIP

P95000093575 (5) DOCUMENT # 1. Corporation Name

MILLE-FEUILLES, INC.

Principal Place of Business Mailing Address 217 S. ALCANIZ ST. 217 S. ALCANIZ ST. PENSACOLA FL 32501 PENSACOLA FL 32501 3. Date Incorporated or Qualified 3a. Date of Lagt Report 12/08/1995 Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 2:6 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Trust Fund Contribution Added to Fees 28 23 This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes ☐ No Zip Country Country Zio 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BRANDON COBB FILINGS, INC. 82 reet Address (P.O. Box Number is Not Acceptable) 4300 BAYOU BOULEVARD 3732 NW 16TH ST. SUITE FOURTEEN FT. LAUDERDALE FL 33311 PENSACOLA Spations 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 obligations of Segion 607.8505, Florida Statutes. 11. Pursuant to the provisions of or registered agent, or both familiar with, and access DRANDON SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 22 Addition Change DELETE 1.1 THUE TITLE CR2E034 1.2 NAME STANFIELD, JEAN P NAME 217 S. ALCANIZ ST. 1.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32501 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition ☐ Change DELETE 2.1 TITLE TITLE STANFIELD. ESTHER V 22 NAME NAME 217 S. ALCANIZ ST. 23 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32501 2 4 CHTY - \$1 - ZIP CITY - ST- ZIP DELETE Change Addition 3. 1 TITLE TITLE ASKEW, JEAN C 3.2 NAME NAME 217 S. ALCANIZ ST. 3.3. STREET ADDRESS STREET ADDRESS PENSACOLA FL 32501 3 4 CHTY - \$T - ZIP CITY - ST - ZIP Addition ☐ Change DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIF CITY-ST-ZIP Change ■ Add-tion DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 6 1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Ido 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 early; that I am an office: 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 13 if happond, or on any ittachment with an address. P STANFARD APRIL 26, 1994 461-6639

6 4 CITY - \$1 - ZIP