

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

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED  
 99 AUG 12 PM 4:09  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

**DOCUMENT # P96000098550**

1. Corporation Name  
**GER-MIL CORP.**

Principal Place of Business  
**5257 88TH STREET EAST  
 BRADENTON FL 34202**

Mailing Address  
**5257 88TH STREET EAST  
 BRADENTON FL 34202**

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified  
**12/02/1996**

4. FEI Number  
**65-0725327**

Applied For  
 Not Applicable

22 Suite, Apt #, etc.

26 Suite, Apt #, etc.

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

23 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

24 Zip

25 Country

28 Zip

30 Country

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MILHRAN, GERALD J  
 5257 88TH STREET EAST  
 BRADENTON FL 34202**

81 Name

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

83

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>MILHRAN, GERALD J</b>	
STREET ADDRESS	<b>5257 88TH STREET EAST</b>	
CITY-ST-ZIP	<b>BRADENTON FL 34202</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
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TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

**200002963842--4**  
**-08/19/99--01018--006**  
**\*\*\*\$150.00 \*\*\*\$150.00**

14. I 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. 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, with all other like empowered.

SIGNATURE: *Gerald J Milhran* **GERALD J MILHRAN** *08/27-99*  
 SIGNATURE AND TYPED, PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date/Time Printed

1  
2  
Also find copy of first check I wrote in  
March of 1999, but I sent to Florida Dept of Revenue

I got 2nd notice end of June 1999 call reinstatement  
Dept July 11 1999 I was instructed to send copy of small check  
a new check for \$150<sup>00</sup> and sign reinstatement form I  
mail in, was sent July 2 1999

Called July 23 1999 Reinstatement Dept, I was  
told they have no record of my payment, this  
will be by third time trying to pay my fee

Hope this can work

Thank You J. D. [Signature]

3  
Pay out Check for Florida Corp

Sent in error to Dept of Revenue

\$150<sup>00</sup> March 27, 1999 - How correct Check # 1119

Call Remittance Dept July 1 after I receive 2nd notice  
Talk to a woman she said make copy of Cancel Check on  
mail along with another check for \$150<sup>00</sup> to Dept of  
State

Call July 23 850-487-6059 x2 I was told they

do not show receive the check - also sent to her not record  
written on July 1 1999 sent to FL Dept of State  
CK # 1143

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