PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000032669

MILE HIGH ENTERPRISES, INC.

FILED Mar 08, 1999 8:00 am Secretary of State 03-08-1999 90079 048 ***150.00



Principal Place	e of Business	Mailing Address			
2410 SW 86 TE	ERR	2410 SW 86 TERR			
MIRAMAR FL 33025 MIRAMAR FL 33025			DO NOT WRITE IN T	THE COACE	
					HIS SPACE
				3. Date incorporated or Qualifed	
				04/10/1997	I I I I I I I I I I I I I I I I I I I
	lace of Business	2a. Mailing Address	216-11	4. FEI Number	Applied For
21 842	L WOODLAND AND		(1709	65-0742880	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
22		27			
City & Stat		City & State	OMAN SIN	6. Election Campaign Financing	\$5.00 May Be
23 wes	TVALU BENEH FLA		SEATH TO	Trust Fund Contribution	Added to Fees
Zip D-2-C	Country	Zip	Country	8. This corporation owes the current year	r Intengible No
24 337	15 25 PALM BEACH	1 29 33416 3	o (morsela	Personal Property Tax. 10. Name and Address of New Registe	
	9. Name and Address of Currer	nt Registered Agent'	81 Name		
EEDI	NANDEZ. LELIA		I Name Sc	SZANNE FAUREAU	<u> </u>
			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
) SW 86 TERR		842	WOODLAND HUE	
MING	AMAR FL 33025		83		
}			84 City		85 Zin Code
Í	_		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	est Palm <u>Beach</u>	FL 33415
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statules	, the above-named corp	oration submits this statement for the purpos on's board of directors. I hereby accept the a	e of changing its registered
office or r	registered agent, or both, in the State	of Florida, Such change was auti ations of Section 607 0505, Florid	norized by the corporation	on's board of directors. I nereby accept the a	ppointment as registered
agent. i a		alloris di. decuari cor .coco, i raina	a oldidios.		
		(1)			L L
SIGNATURE	\propto ν \sim ν \sim		egistored Agent signature require	d when reinstating) DATI	
SIGNATURE	Stignature, typed or printed name of registered age				
SIGNATURE 12.	Stignature, typed or printed name of registered age	ent and title if applicable. (NOTE: R	egratored Agent signature required 13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	
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Interest certify that the importance supplied with his failing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further carrie 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 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 appendiress, with all other like empowered.

SIGNATURE: