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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000055137 (8)

MILLAN AUTO REPAIR CORPORATION

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						, , , , , , , , , , , , , , , , , , , ,
991 S STATE ROAD 7. C-4		991 S STATE ROAD 7. C-4				
PLANTATION FL \$3317		PLANTATION FL 33317				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						06/23/1997
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0767910 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired Sa.75 Additional
22 City P. State		City P. Stoto				Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip Country				8. This corporation owes or has paid the current year Intangible
	25	29	30	,,,,,		Personal Property Tax due June 30. Yes No
24]	9. Name and Address of Current		<u> </u>			10. Name and Address of New Registered Agent
MILIAN, HUGO				81	Name	
	S STATE ROAD 7, C-4		82 St		Ctrool A	Address (P.O. Box Number is Not Acceptable)
PLANTATION FL 33317		.		02	aueer A	Address (rO. Dox Humber is Not Acceptable)
· Buttillian i F agai.				83		
				84	City	85 Zip Code
					-	FL
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 registance.						
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 GLORICA FUE 115/11 da.						
				d Ago	ent signature i	e required when reinstaling) DATE
12.	PD OFFICERS AND	DIRECTORS	13.	TI E	Т	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	MILLIAN, HUGO	☐ neret¢				Change C Addition
NAME DYDSSY ADDRESS	MA A ATLITE BOAR 7 O A		,	VUDDECE	<u> </u>	
STREET ADDRESS	PLANTATION FL 33317	ANTATION FL 00047			ADDRESS	
CITY-ST-ZIP TITLE	STD	DELETE	1.4 CI 2.1 TI		1-24	Change Addition
NAME	FUENZALIDA, GLORIA					
STREET ADDRESS	AALA ATITE CAIR T O I				ADDRESS	· .
CITY-SI-ZIP	PLANTATION FL 33317		2. 4 CITY-ST-ZIP		- 1	
TITLE				TLE		Change Addition
NAME			3.2 N/			
STREET ADDRESS			3.3 ST	TREET	ADDRESS	
CITY-ST-ZIP			3.4. C	ITY-S	ST-ZIP	
TITLE		☐ DELETE	4.1 TI			Change Addition
NAME			4 2 N	IAME		
STREET ADDRESS			4.3 ST	TREET	ADDRESS	
CITY-ST-ZIP			4.4 CF	17-S	T - ZiP	
TITLE		DELETE	5.1 TI	TLE		Change Addition
NAME			5.2 N/	AME	-	
STREET ADDRESS			5.3 \$1	TREET	ADDRESS	
CITY-ST-ZIP			5.4 CI	ITY-\$	iT-ZIP	
TITLE	DELETE 6		6.1 Tr	TLE		☐ Change ☐ Addition
NAME			6.2 N/	AME	i	,
STREET ADDRESS			6.3 \$1	TREET	ADDRESS	
CITY-ST-ZIP			6.4 CI			
14. Lherehy c	artify that the information supplied wil	th this filing does not qualify	for the exe	emo	tion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information

14. Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 1.19.7(3)(i), Fioritia Statutes, Further being make 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.

CONSTUDE MARIA MULLERYNINA

4-24/98 (954)3778